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ABSTRACT

Attracting over 550 Indian and Alaska Native participants representing 139 tribes, the conference focused on formulation of a National Indian Policy on Aging and paying tribute to American Indian and Alaskan Native elders. Section I of the proceedings presents an introduction with background information on the conference and conference format highlighting special events (picnic, traditional dress revue). Section II is devoted to participants who received Elder of the Year awards in their region. Section III presents excerpts from Wendell Chino's (President of the Mescalero Apache Tribe) keynote address. An overview of main issues and concerns expressed at the conference is presented in Section IV. Workshop descriptions are included in Section V. Topics of workshops presented are: federal and local Indian aging policy development; fundraising for aging programs; intergenerational programs; recording and teaching tribal traditions; an overview of Title VI; maintaining your health; basics of the Older American Act; Civil Rights of Indian Elders; wake up to exercise; the aging process; and money management. Concluding is the summary of the project, National Indian Council of Aging, Inc. Appendices contain 17 resolutions adopted and passed at the conference and Indian issues of the 1981 White House Conference on Aging. (ERB)

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"Indian Elders: A Tribute"

Proceedings of

The Fourth National Indian Conference on Aging

Reno, Nevada

August 23-25, 1982

RC013998

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"Indian Elders: A Tribute"

Proceedings of

The Fourth National Indian Conference on Aging

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Reno, Nevada

August 23-25, 1982

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THE RENO CONVENTION AND VISITORS AUTHORITY

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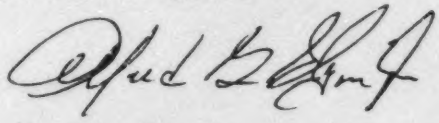
NATIONAL INDIAN AGING POLICY

The Older Americans Act was enacted into law in 1965. Since that time, it has been amended nine times and has had five Commissioners on Aging under five administrations. With the increased numbers of persons working in the field, it is important that personnel understand the manifestations of the Older Americans Act and how the Administration on Aging advocates at the federal level for aging policy development. In every state, there are Offices on Commissions on Aging; there are 57 State Units on Aging with over 600 Area Agencies on Aging. Just how that system works can be a confusing issue; how the Indian tribes and Indian organizations access that system is even more complex. Without a National Indian Policy on Aging it is near impossible. The Older Americans Act and accompanying regulations are the foundation of the aging network.

But before policy can be developed, a wholistic view of the Older Americans Act must be undertaken and a complete understanding of how the legislative process functions. The workshop entitled, "Federal and Local Indian Aging Policy" is but a beginning point in the development process of a comprehensive Indian aging policy. The policy workshop was not just another conference happening, but was the continuance of the 1980 Mini-White House Conference issues; the 1981 White House Conference recommendations; and Commissioner Tolliver's commitment to the development of a National Indian Aging Policy. The Fourth National Indian Conference on Aging adopted a concept paper which will serve as a basis for the policy development process.

It is with this in mind, that we invoke the United States Government to establish a policy that guarantees to all Indian elderly, services that are commensurate with their needs and that these services be provided in a manner to which they are accustomed as American Indians.

Alfred G. Elgin, Jr.



Executive Director
National Indian Council on Aging

NATIONAL INDIAN COUNCIL ON AGING, INC.

I. CONFERENCE REPORT

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INTRODUCTION

Until recently, Indian programs and conferences were generously supported or subsidized by funds from the federal government. There seemed to be a genuine readiness on the part of the federal government to underwrite programs, meetings and other efforts which impacted on the lives of American Indian and Alaskan Native people. But now, it seems that those "good old days" are gone; and instead of asking "Where can we help?" our government now seems to be asking, "Where can we cut back?"

A veritable cross-roads confronts American Indian and Alaskan Native interests around the country. With a critical shortage of funds to operate much needed programs and conduct business for the sake of Indian people, tribes, federations and other agencies are having to look to other sources than the federal government to carry on programs which many may have taken for granted in the past. Tribes and other agencies are having to look to the private sector and to local partnerships in order to obtain the assistance needed to maintain even their present level of operation in essential programs. Some very important programs are being cut out altogether due to the limitations now being placed on funding.

It was in the context of this "belt-tightening" philosophy that NICOA sought to convene its delegates to the Fourth National Indian Conference on Aging in Reno, Nevada August 23 - 25 of this year. With no subsidies available from the federal government to bring delegates to the conference, it seemed that a well-attended conference would not be possible. But the resilience and resourcefulness of our Indian people have been underestimated many times in the past — and this conference was no exception. Despite the obstacles, from all across the country the delegates came as though called by some great voice. Somehow, over 550 Indian and Alaskan Native people managed to find the support neccessary to attend the three-day conference. They came with their questions, views, and burdens for the issues facing American Indian and Alaskan Native elderly in a world which is rapidly changing, and which poses many challenges to them and their people. The important thing though is: they came.

They came because they were interested and concerned for seeing the purposes of the conference fulfilled. The primary purpose of the conference was to discuss issues which should be taken into consideration in the formulation of a National Indian Policy on Aging. Workshop topics and special speakers were carefully chosen so as to fulfill this purpose. A policy statement was devised as an outgrowth of these sessions, and presented to the conference in the form of a resolution (see Resolution 6, Appendix).

A second purpose of the conference was to pay tribute to American Indian and Alaskan Native elders, as seen in the conference theme: "Indian Elders: A Tribute." Actually, the very fact that so many attended in the face of difficulty and shortage of funds is a real tribute to the delegates, in and of itself. In tribute to the elders, the conference also had as its purpose to provide informative and entertaining workshops and activities designed especially for the elder conferees.

BACKGROUND

It was during the process of the development of issues to be discussed at our **Third** National Indian Conference on Aging that NICOA became involved in a planned White House Conference on Aging to be conducted in Washington, D.C. NICOA was awarded a grant from the federal government to conduct a preliminary mini-White House Conference on Aging in preparation for the major conference which would follow immediately thereafter. The purpose of the mini-White House Conference was to discuss and make recommendations on fourteen (14) major issues specified by the White House Conference on Aging planners. Accordingly NICOA's mini-White House Conference consisted of 25 workshops dealing with the 14 issues, and resulted in the development of a Technical Report to be submitted to the WHCoA (see Appendix).

On the basis of the mini-White House Conference discussions, and the Technical Report, a NICOA Quarterly was put together, which was then used as a training device for the NICOA delegates to the WHCoA. The issues discussed in the Technical Report and the Quarterly were subsequently presented to the WHCoA from the NICOA perspective.

In an informal meeting between members of NICOA and staff of the Administration on Aging (AoA), the Commissioner of the Administration on Aging stated that a policy would be forthcoming from the AoA dealing with Indian aging issues and Indian programs, and that Indian entities (such as NICOA) would be included in the development of that policy at some point. A further commitment to the development of such a policy was made following the WHCoA at a hearing before the Select Committee on Indian Affairs on oversight of federal aging programs. The Commissioner re-affirmed the commitment of AoA to develop the policy when she stated: ". . .we would certainly want to consider the need for a unique policy."

In the ensuing months, NICOA sought to participate in the development of the policy, but the process has been quite long and involved; so that, today, the stage is being set for collaboration between NICOA and AoA for developing a mutually acceptable policy. NICOA has not simply sat back and waited for action on the part of AoA, but has taken the initiative through the Fourth National Indian Conference on Aging to develop its own policy statement (see Appendix, Resolution 6).

AoA has develped a "concept paper" dealing with the subject of a National Indian Policy on Aging, and is in the process of condensing that paper for discussion in the month of October with NICOA.

The Fourth National Indian Conference on Aging has been a significant event, not only in terms of providing information and clarifying the issues which concern Indian elderly, but also in terms of stimulating further definitive action toward the ultimate establishment of a formal policy on aging. Some of the steps taken to prompt that action are described in this report.

PARTICIPANTS

While the Third National Indian Conference on Aging in 1980 was attended by more than 1100 registrants, it should be noted that many of those were brought to the conference through various forms of subsidy. It is remarkable then, that 551 registrants were in attendance at the Fourth Conference, despite the fact that there was no federal funding to underwrite the expense of attending the conference. It is worthy of special mention here because (as noted earlier) this is indicative of the high level of concern that is shared by so many in tribes and urban areas across the nation. A further significant statistic is the fact that more than 60% of those in attendance at the Fourth Conference were themselves elders (60 years and older). This may be due, in part to the design of the conference which included many workshops and activities especially geared for the elderly.

Those in attendance represented 26 different states (plus the District of Columbia), and 139 tribes, bands, colonies and rancherias; certainly a broad cross-section of the country's Indian population was represented. Note the following list the the tribes represented:

TRIBES

Aleut
Apache
Apache (Jicarilla)
Apache (Mescalero)
Apache (San Carlos)
Apache (White Mountain)
Arikara
Assiniboine
Blackfeet
Caddo
Cayuse
Cherokee
Cherokee (Eastern)
Cherokee (Oklahoma)
Cheyenne
Cheyenne (Northern)
Chickasaw
Chippewa
Chippewa (Minnesota)
Chippewa (Pembina)
Chippewa (Turtle Mountain)
Chippewa (White Earth)
Choctaw
Coeur d'Alene

Colorado River
Colville
Comanche
Creek
Delaware
Delaware (Western Oklahoma)
Diegueno
Eskimo (King Island)
Grande Rhonde
Gros Ventre (Fort Belknap)
Haida
Hidatsa
Hoopa
Hopi
Hualapai
Iowa (Kansas)
Kickapoo (Kansas)
Kickapoo (Oklahoma)
Kiowa
Klamath
Kumeyaay
Lummi
Maricopa (Gila River)
Menominee
Mesquakie
Miccosuki
Mission (Jamul)
Mission (Manzanita)
Mission (San Luiseno)
Mission (Sycuan)
Mission (Viejas)
Mohave-Apache (Fort McDermitt)
Muskogee
Narrangansett
Navajo
Nez Perce (Idaho)
Nisqually
Nooksack
Omaha
Oneida (Wisconsin)
Osage
Otoe-Missouria
Ottawa
Paiute (Fort McDermitt)
Paiute (Kaibab)
Paiute (Las Vegas)
Paiute (Lovelock)
Paiute (Reno-Sparks)
Paiute (Susanville)
Paiute (Warm Springs)
Papago
Papago (Ak-Chin)
Pawnee
Peoria
Pima
Pima (Gilla River)
Pima-Maricopa (Salt River)
Pomo
Pomo (Dry Creek)
Pomo (Coyote Valley)
Potowatomie
Potowatomie (Citizen)
Potowatomie (Prairie)
Pueblo (Acoma)
Pueblo (Cochiti)
Pueblo (Isleta)
Pueblo (Jemez)
Pueblo (Laguna)
Pueblo (Nambe)
Pueblo (Picuris)
Pueblo (San Ildefonso)
Pueblo (San Juan)
Pueblo (Santa Clara)
Pueblo (Santa Domingo)
Pueblo (Taos)
Pueblo (Tesuque)
Pueblo (Zia)
Pueblo (Zuni)
Quechan
Quinault
Salish and Kootenai
Seneca (New York)
Seneca-Cayuga
Shawnee
Shoshone (Duckwater)
Shoshone (Elko)
Shoshone (Goshute)
Shoshone (Wind River)
Shoshone-Bannock (Fort Hall)
Shoshone-Paiute (Duck Valley)
Siletz
Sioux
Sioux (Oglala)
Sioux (Sisseton-Wahpeton)
Sioux (Yankton)
Skokomish
Spokane
Squaxin Island
Stockbridge-Munsee
Tlingit
Tsimpsean
Umatilla

Ute (Southern)
Walla Walla
Warm Springs
Washoe (Nevada and California)
Washoe (Reno-Sparks)
Wichita
Winnebago (Nebraska)
Winnebago (Wisconsin)
Wintun (Round Valley)
Yakima
Yurok

AGENDA

DATE/TIME	EVENT	PRESENTORS
SUNDAY, August 22, 1982		
10:00 - Noon	National Tribal Chairmen's Association National Indian Organizations Meeting	Dottie Starks
1:00 - 4:30	National Indian Council on Aging Annual Council Meeting	Walter Moffett
5:00 - 7:00	National Tribal Chairmen's Association National Indian Organizations Meeting	Dottie Starks
6:00 - 10:00	Conference Registration	
MONDAY, August 23, 1982	**TRADITIONAL DRESS DAY**	
8:00 - Noon	Conference Registration	
9:00 - Noon	Opening Session Call to Order ..... Chairman Walter Moffett Invocation ..... Rev. Robert Pinezaddleby Welcome to Nevada ..... Inter-Tribal Council of Nevada-Josephine Gonzales, Executive Director NICOA Greetings .... Chairman Walter Moffett Introductions ..... Chairman Walter Moffett Keynote Address ..... Mr. Wendell Chino President, Mescalero Apache Tribe Announcements and Conference Overview ..... Alfred Elgin, Jr. NICOA Executive Director	
Noon - 1:00	Lunch (Picnic in the park adjacent to the Hilton, Sponsored by the Inter-Tribal Council of Nevada,	
1:00 - 5:00	Workshops (concurrent) "Federal/Local Indian Aging Policy Development"	Alfred Elgin, Jr. Alice Norris Arlene Naquayouma Elmer Savilla
1:00 - 5:00	"Fundraising for Aging Programs"	Tony Correa Jerry Bathke
	"Intergenerational Programs"	Robert Pinezaddleby Ken White Ory Cuellar
	"Recording/Teaching Tribal Traditions"	Walter Moffett Betty White Joe Abeyta, Sr.
1:30 - 3:15	Senior Workshop "Basic Older Americans Act"	Lee Bourgeau

NOTE: From 1-5 p.m. in the Opera House Theatre, special events were staged. Singing groups, dancing, games, films and traditional activities will be occurring concurrently with the workshops. The HEALTH FAIR was from 10-3 p.m. each day beginning Monday through Tuesday. The Golf Tournament is on Tuesday at Brookside/Reno Golf Course; tee times begin at 12 Noon. The entry fee is $10; report by 11:30 a.m.

DATE/TIME	EVENT	PRESENTORS
MONDAY, August 23, 1982		
3:30 - 5:00	Senior Workshop "Civil Rights of Indian Elders"	Gerald Wilkinson
7:00 - 9:00	Traditional Dress Revue	
TUESDAY, August 24, 1982		
9:00 - 11:30	Workshops (concurrent) "Federal/Local Indian Aging Policy Development"	Alfred Elgin, Jr. Alice Norris Arlene Naquayouma Elmer Savilla
	"Overview of Title VI"	Jack DeGroat Paul Tiger Susan White
	"Fundraising for Aging Programs"	Tony Correa Jerry Bathke
9:00 - 10:00	Senior Workshop "Wake Up to Exercise"	Kenneth Cody
10:15 - 11:30	Senior Workshops "The Aging Process" "Money Management"	William Freeman Jean Hunt
11:30 - 1:00	Lunch (On Your Own)	
1:00 - 3:00	Workshops (concurrent) "Overview of Title VI"	Jack DeGroat Paul Tiger Susan White
	"Intergenerational Programs"	Robert Pinezaddleby Ken White Ory Cuellar
	"Recording/Teaching Tribal Traditions"	Walter Moffett Betty White Joe Abeyta, Sr.
	"Maintaining Health"	
5:00 - 7:00	Barbeque at the Reno-Sparks Multipurpose Center (Transportation will be provided by the Center) $3 per person	Betty Pancho
7:30 -	Pow-Wow at the Reno-Sparks Colony Gymnasium	Norm DeLorme
WEDNESDAY, August 25, 1982		
9:00 - Noon	General Session Adoption of Resolutions Adoption of National Indian Aging Policy Closing Remarks	Walter Moffett
Noon	Adjournment of Conference	

CONFERENCE FORMAT

In previous conferences of NICOA, it seems that the conference activities and workshop proceedings were not particularly directed at the seniors who were in attendance. At the Fourth National Indian Conference on Aging, however, the needs and interests of the elders who would attend became a focal point and primary objective of the conference planning and format. Accordingly, special sessions were held each day which catered especially to the needs of the elders, and were designed as much for their enjoyment as they were for their information.

The general sessions, involving virtually all of the delegates to the conference, were held at the beginning and at the end of the conference. The opening session was intended not only for the purpose of greeting the delegates, but also for setting the tone for the remainder of the conference — a task which was shared by the keynote speaker, Wendell Chino who is President of the Mescalero Apache Tribe, Ms. Josephine Gonzales, Executive Director of the Inter-tribal Council of Nevada, Mr. Walter Moffett, NICOA Chairman, and Executive Director of NICOA, Mr. Alfred Elgin.

The closing session was devoted to the open discussion of the resolutions which were generated during the course of the conference.

In between, the workshops centered on critical issues facing NICOA and the American Indian and Alaskan Native population in general. Several workshops were held concurrently each day, and were attended on an elective basis, giving attendees ample opportunity to participate in a variety of discussions.

THE TOPICS OF GENERAL INTEREST IN THE WORKSHOPS WERE AS FOLLOWS:

1. Federal and Local Indian Aging Policy Development
2. Fundraising for Aging Programs
3. Intergenerational Programs
4. Recording and Teaching Tribal Traditions
5. Overview of Title VI
6. Maintaining Health (a Health Fair and screening effort).

THE "SENIOR WORKSHOPS" (I.E., THOSE DESIGNED ESPECIALLY FOR THE ELDERS IN ATTENDANCE) WERE:

1. Basics of the Older Americans Act
2. Civil Rights of Indian Elders
3. Wake Up to Exercise
4. The Aging Process
5. Money Management

There were also a number of special events (see following section), which greatly added to the enjoyment of the conference.

SPECIAL EVENTS

HEALTH FAIR

The Health Fair was a very successful component of the conference. This task was coordinated locally through the Inter-Tribal Council of Nevada. In all, there were 50 volunteers that helped in making the fair a success. Various professional medical and health services personnel from local hospitals, clinics, and organizations manned the fair. There were twelve stations in all consisting of the following:

1. Cardiac pulmonary resuscitation — safety exhibit.
2. Anemia screening.

3. Oral cancer screening.
4. Native foods exhibit.
5. Height-weight screening.
6. Blood pressure screening.
7. Nutrition exhibit.
8. Drug abuse exhibit.
9. Diabetes exhibit.
10. Laboratory blood testing.
11. Vision screening.
12. Summary and referral.

The Anemia Screening station took blood samples and gave immediate feedback to the participants. The samples were taken by simply prodding the finger with a needle. A dentist was used at the oral screening station to check gums, teeth, and the general oral condition of participants. Each station was well tended with persons who answered questions, explained findings, and provided handouts.

The Health Fair handled all it could during the conference. The 180 persons that were screened, received referral sheets which they could take to their doctors or clinics for follow-up. Of particular importance was the fact that there were a number of the seniors screened who were found to have serious health conditions — for these, referral was a critical and urgent matter, as some of the illnesses detected were life-threatening.

PICNIC

Special activities were offered at the 4th National Indian Conference on Aging which provided entertainment, enjoyment and cultural enrichment for all the delegates. These activities included a Picnic Lunch, speeches, games, health fair, pow-wow, bar-be-que, traditional dress revue and an awards ceremony. All of these events required assistance from the local Nevada Indian communities.

The Inter-Tribal Council of Nevada sponsored a Picnic Lunch on Monday, August 23, 1982. The park along the Truckee River was the setting for the Picnic Lunch with over 300 persons beings served. The Picnic Lunch consisted of chicken, green salad, roll, watermelon and a half pint of milk. A jazz concert took place adjacent to the picnic and provided added enjoyment. People either sat at picnic tables or sat on the green grass and ate their lunches. There was plenty of sunshine with the temperature being in the comfortable upper 70's.

OPERA HOUSE EVENTS

On Monday and Tuesday afternoons, the elders that chose not to attend workshops gathered in the Opera House Theatre to listen to presentations. Elders took turns talking about aging concerns and Indian affairs in their particular communities, states and the national level. The average presentation lasted from 20 to 30 minutes. Both afternoons were filled with interesting presentations.

TRADITIONAL DRESS REVUE

Monday, the first official day of the conference was designated as "Traditional Dress Day." Indians from throughout the country were beautifully attired in their traditional dress. In the evening, a dress revue was presented. Approximately forty-five elders modeled their traditional clothing. All areas of the country were well represented. Indian dress of the western coastal tribes, the Pueblos of the southwest, the Plains tribes, and the northern midwest tribes were modeled. Beaded buckskin, turquoise jewelry, and shawls made up most of the attire modeled by the elders.

The Traditional Dress Revue was presented in the Opera House Theatre of the Reno Hilton. A house-

full of elders, tribal leaders, and other dignitaries attended the two and one-half hour event. The grand finale was having all the models together for group pictures and an honor song.

BAR-BE-QUE

The Reno-Sparks Indian Colony sponsored a beef Bar-be-que at its Multipurpose Complex on Tuesday evening. Approximately 500 individuals were served. The seniors program at Reno-Sparks Indian Colony coordinated the preparation and serving of the Bar-be-que. The soccer field adjacent to the gymnasium was used where tables and chairs were set up for the people. There was plenty of sunshine with the temperature being comfortably on the cooler side. All that took part in the Bar-be-que enjoyed themselves.

POW-WOW

The Pow-Wow took place at the Reno-Sparks Indian Colony gymnasium immediately following the Bar-be-que. Two drum groups from local tribes provided the singing. There were feather dancers, straight dancers, and women in beaded buckskin dresses dancing to northern and southern style songs. Indian jewelry and craft booths lined one end of the gymnasium. While part of the crowd watched the dances and tapped their feet to the beat of the drum, the other part was browsing or buying at the booths. Handgames were also played by the elders in an adjoining room with wagers passed back and forth. There was plenty of cultural entertainment for all those who attended.

AWARDS CEREMONY

A break in the midst of the Pow-Wow provided attention to the awarding of "Elder of the Year" awards and "Service to Elders" awards. Each area designation honored an Indian elder. Twelve area awards were given. An overall "National Indian Elder of the Year" award was given. Two service awards were given along with three certificates for service to elders. The various categories of awards consisted of trophy plaques. Each plaque was engraved indicating the area desigination, the honor and name of the recipient. There was a lot of picture taking and rejoicing at the ceremony. Traditional honor dances were performed at the conclusion of the presentations. Three NICOA Board Members presented the awards which included the Chairman. The following is a roster of the individuals and their awards:

Aberdeen Area Elder of the Year - Pearl Hankai - Omaha
Albuquerque Area Elder of the Year - Edith Wilson - Sioux
Anadarko Area Elder of the Year - Arthur Fields - Pawnee
Billings Area Elder of the Year - Robert Yellowtail, Sr. - Crow
Central Area Elder of the Year - Helen Jacobs - Eastern Cherokee
Juneau Area Elder of the Year - Victor Haldane - Haida
Minneapolis Area Elder of the Year - Winifred Jourdain - Chippewa/Sioux
Muskogee Area Elder of the Year - Geraldine Jones - Chickasaw
Navajo Area Elder of the Year - Kenneth Cody - Navajo
Phoenix Area Elder of the Year - Dan Bulletts - Kaibab Paiute
Portland Area Elder of the Year - Richard A. Halfmoon - Nez Perce
Sacramento Area Elder of the Year - Woody Groves - Cherokee
National Elder of the Year - William Minthorn - Cayuse
National Service Award - Joseph Abeyta, Sr. - Santa Clara Pueblo
NICOA Merit Award - Larry Curley - Navajo
Certificate of Recognition - Martin Bird - Santo Domingo Pueblo
Certificate of Recognition - Rose P. Antonio - Acoma Pueblo
Certificate of Recognition - Randle Durant - Pima

SENIOR GOLF DAY

On Tuesday afternoon several elders and conference delegates got together at the Brookside/Reno Golf Course to try out their stix. Everyone enjoyed the clean fresh air and put in an enjoyable round of golf. The tournament format was changed because variance in the individual handicaps did not allow for two men best-ball. Upon completing the round of play, the golfers went on to the Bar-be-que and the Pow-Wow.

These special events were designed to provide a full array of activities for the conference delegates.

NATIONAL INDIAN COUNCIL ON AGING, INC.

II. CONFERENCE THEME:

"INDIAN ELDERS: A TRIBUTE"

A. Tribute Where Tribute is Due 12
B. National Indian Elder of the Year 13
C. Other Awards 13,14

TRIBUTE WHERE TRIBUTE IS DUE

It seems that our modern "enlightened" society has drifted away from some of the basic values which have made our country as strong as it is today. The home, the family unit, the practice of religious beliefs, and respect for the land all seem to have gone by the wayside as a new fascination with gadgets, games, entertainment and humanism has dominated the thoughts and actions of people all around us. One of the last strongholds of the tried and true values which make a people great is the Indian community, which has held tenaciously to its time-honored traditions and values. But why has this been so? Who is responsible for the teaching and preservation of these values which are so essential to the survival of people, tribes and nations? In the Indian community it has been the elders.

In days gone by, the elders were looked to for guidance and wisdom. Many times the very fate of their people rested with the council of elders. But times are changing. Elders today must compete with the attraction and entertainment provided by mass media. Their younger relatives are so often pre-occupied with the pursuit of happiness via other interests and through the competitive wage-earner's life style. Sad to say, in some places, the elders are passing from the scene almost unnoticed.

What can be done to prevent this happening in more places? How can we reverse the trend? The answer is clear: we must re-affirm their value to us as leaders. We must return to the days when their oracles were the universally accepted law of their people. We must let them know that they are still venerated and heard. What better way to show tribute to those who are so deserving than to listen to them and respect them — and to care for their needs.

Let us give tribute where tribute is due. Look to the old ones, and honor them as in days gone by. That's what the Fourth National Indian Conference on Aging was all about. But the conference is history now. We must not let the tribute die, or lie dormant until the next conference. By the next conference, perhaps many of our old ones will have passed from the scene. We will be the losers if we do not pay them the tribute they deserve in the final days of this life. The tribute we give these elders today and tomorrow, and the next day will become treasures to us in the days to come, for the elders will have left us a legacy of their knowledge and wisdom because we had sense enough to take the time to listen.

AWARDS

National Indian Elder of the Year, Mr. William Minthorn has distinguished himself through a lifetime of accomplishments and service to his people, the Umatilla Federation of Oregon. Born in 1903 on the Umatilla Indian Reservation, he grew up to become one of the outstanding personalities among his people. In 1978 he was named Chief of the Confederated Tribes of the Umatilla Indian Reservation, including the Cayuse, Umatilla, and Walla Walla tribes. He attended the Jesuit Mission School of St. Andrews on the reservation and graduated from Chemewa (Salem, Oregon) and Haskell (Lawrence, Kansas) Indian Schools. He went on to graduate at Gonzaga University in Spokane, Washington in 1953 with a degree in Civil Engineering. Mr. Minthorn's professional career spanned 28 years of governmental service with the Bureau of Indian Affairs and the U.S. Army Corps of Engineers.

OTHER AWARDS

Aberdeen Area Elder of the Year
— Pearl Hankai — Omaha

Albuquerque Area Elder of the Year
— Edith Wilson — Sioux

Anadarko Area Elder of the Year
— Arthur Fields — Pawnee

Billings Area Elder of the Year
Robert Yellowtail, Sr. — Crow

Central Area Elder of the Year
— Helen Jacobs — Eastern Cherokee

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Juneau Area Elder of the Year
— Victor Haldane — Haida

Minneapolis Area Elder of the Year
— Winifred Jourdain — Chippewa/Sioux

Muskogee Area Elder of the Year
— Geraldine Jones — Chickasaw

Navajo Area Elder of the Year
— Kenneth Cody — Navajo

Phoenix Area Elder of the Year
— Dan Bulletts — Kaibab Paiute

Portland Area Elder of the Year
— Richard A. Halfmoon — Nez Perce

Sacramento Area Elder of the Year
— Woody Groves — Cherokee

National Elder of the Year
— William Minthorn — Cayuse

National Service Award
— Joseph Abeyta, Sr. — Santa Clara Pueblo

NICOA Merit Award
— Larry Curley — Navajo

Certificate of Recognition
— Martin Bird — Santo Domingo Pueblo

Certificate of Recognition
— Rose P. Antonio — Acoma Pueblo

Certificate of Recognition
— Randle Durant — Pima

NATIONAL INDIAN COUNCIL ON AGING, INC.

III. EXCERPTS FROM THE KEYNOTE ADDRESS

EXCERPTS FROM KEYNOTE ADDRESS

Mr. Wendell Chino, President of the Mescalero Apache Tribe for over 20 years, was the keynote speaker. His presentation centered around major topics as excerpted from this speech:

- **Veneration of Elders** — "This is one of the important values of the people, the respect and honor we bestow upon our elders. But, I'm very much afraid that perhaps we are losing ground on this very important value we had among our people. So I say to all of you who are gathered here, we bless you and honor you for your authority and example."

- **Elders as Advocates** — "They have been our spokesmen for our Indian people and our Indian cause. Our elderly maintained their position when it was unpopular to do so. One hundred years ago, fifty years ago, thirty years ago, even ten years ago, and they were uncompromising in their position of life."

- **Elders as Repository** — "They have been the vault, the bank. As the vault of our Indian people, you have safeguarded our language, our values, our arts, our songs, our dances."

- **Priority of Human Relationship** — "Our elders gave high priority to human relationships and human elements that bind us together and because they had this human understanding, they brought into the tribe, tribal understanding. Since the elders are the counselors today, they continue to provide the answers and solutions to the problems that beset our people."

- **Medicine Men and Women** — "You have contributed to our physical, emotional and spiritual well-being."

In closing Mr. Chino stated, "Our elders have served their generation extremely well and we can only hope the young people of today, of this present generation will do what you have done for us."

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NATIONAL INDIAN COUNCIL ON AGING, INC.

IV. OVERVIEW OF THE MAIN ISSUES AND CONCERNS

OVERVIEW OF THE MAIN ISSUES AND CONCERNS

There were several events which combined to set the stage for the Fourth National Indian Conference on Aging. The cumulative effect of these events was to determine the emphasis which would characterize the conference. These events were: the recommendations which grew out of the Third National Indian Conference on Aging in 1980, the issues for discussion at the mini-White House Conference on Aging, the subsequent Technical Report submitted to the White House Conference on Aging, and statements made at an oversight hearing following the WHCoA. These events combined to bring the focus of attention to the need for the development of a National Indian Policy on Aging, which would specify the manner in which the federal government supported and/or administered Indian programs. For years the government has passed legislation and made allocations of funds on a rather generalized basis, without enough attention being given to the uniqueness of the relationship between the Tribes and the federal government. More appropriate action has been needed to reflect that "unique" relationship, hence: a unique policy.

The conference addressed a number of elements which should be accounted for in the formulation of such a policy; among them was the need for an "Indian Desk" at the federal level in order to give due attention to the real impact of various issues and programs on the lives of Indian people. It was felt that this role should be filled by a person who is himself/herself an Indian in order to provide an Indian "focal point" and to ensure a positive response to the needs of the Tribes.

Another element which was regarded as essential to the appropriateness of such a policy was the matter of providing for direct funding to the Tribes so that they would be free to administer federally-funded programs in a way which is more suited to the particular needs of their constituency.

Another main concern of those in attendance at the conference was the need to take into consideration the special circumstances and sometimes intensified needs of the Indian elderly who reside in urban areas, as policies and programs are formulated. There was an appreciable degree of concern that these special circumstances might be overlooked in the midst of setting policy to deal with the relationship of "tribes" to the federal government. It was repeatedly stated by those who made comments at general meetings, and in the workshops that "Indians are Indians," whether they live on the reservations or in urban areas, and that the needs of the individual Indian must be addressed in the policy. The fact that 48% of all Indian people now reside in urban areas makes this issue even more significant. However, it was also stated that the uniqueness of the reservation Indian's needs, as it pertains to the need to develop a unique policy, is somewhat a different set of circumstances from the special concerns of urban Indians, and that there is a good deal of value in addressing and protecting that uniqueness in the policy and in future relationships of the government with the Tribes.

A number of other issues received primary attention at the conference: issues such as Title VI and the Older Americans Act, the proposed elimination of certain tribal programs (eg., CHR, Elderly Home Care, Senior Programs, etc.), and of the effects of the Hopi-Navajo relocation issue. These and other issues are treated in detail in the Resolutions found in the Appendix to this report.

NATIONAL INDIAN COUNCIL ON AGING, INC.

V. WORKSHOPS

WORKSHOPS

As mentioned earlier, the main objectives of the Fourth National Indian Conference on Aging were to: 1) discuss issues to be included in the development of a National Indian Policy on Aging; and 2) to pay tribute to the Indian elderly by means of special recognition and through workshops designed to meet their particular needs and to cater to their interests. As will be seen from the following discussion of the workshop topics, the discussions were carefully planned with these objectives in mind.

FEDERAL AND LOCAL INDIAN AGING POLICY DEVELOPMENT

PANELISTS: **Alice Norris,** a Senior Program Director from Papago

Arlene Naquayouma, representing urban programs from the Phoenix area

Elmer Savilla, speaking from the national perspective, Executive Director of the National Tribal Chairmen's Association

This particular workshop was very well-attended; an indication of the high level of interest in the topic. There was a good deal of sentiment expressed, both on the part of panelists and of those in the audience, for cooperation between the tribes in order to present a unified and persuasive voice to the "powers that be" at the federal level. There was both a sense of urgency and a note of hope sounded as the participants discussed the need to unite in the face of an ever-growing threat to the continuance of federal funds to support Indian programs. Along similar lines, there was a call for consolidation of assistance from the multiple agencies now supporting Indian programs (BIA, IHS, HUD, etc.) under one policy and one adminsitrative entity. It was felt that this consolidation might be effected through the establishment of an "Indian Desk" which would have the central administrative role or be a focal point; and that this role should be filled by an Indian to assure responsive and appropriate action.

Another major need suggested by the participants in order to strengthen the hand of the tribes competing for federal funds was their own involvement in the democratic process, and the influence which they can have through the exercise of their voting privileges. It was held that the election of candidates to public office who were sympathetic to the Indian cause had been proven effective in the past, and has become even more important for the future in the light of the recent wave of funding cut-backs.

A further consideration was mentioned on several occasions during this workshop and one which has many subtle applications and very complicated solutions. That is, the problem of urban Indian elderly not being included in programs which are normally extended to the reservation Indians. While, on the one hand, these urban Indians are not participating in reservation-oriented programs, neither are they utilizing to the fullest possible extent the services which are available to them in the urban areas — due to a number of barriers which have not been successfully overcome.

FUNDRAISING FOR INDIAN AGING PROGRAMS

PANELISTS: **Tony Correa,**

Jerry Bathke, of the Atlantic Richfield Foundation

This workshop was designed to inform participants as to the techniques which could be employed in the solicitation of funds for Indian programs. However, the workshop went a step further in identifying potential sources of funding. With the decreasing availability of federal funds, it is becoming more and more imperative that tribes and agencies seek out alternative sources of funding for the operation of current programs as well as the development of new ones. It was pointed out that the **private sector** has long been overlooked as a potential source of funds. These funds, it was stated, could come from four private sector sources: 1) private foundations; 2) corporations; 3) community foundations; and 4) operating foundations (eg., those funds derived from a will).

It was made apparent that the tribes have not even begun to scratch the surface in the development of working relationships with some of these untapped resources. There are more than 22,500 foundations, 13,000 to 40,000 corporations, and more than 230,000,000 individuals in our country which were men-

tioned as potential sources of assistance, for all these combine to make up "the private sector." Very few of these, however, are being called upon to give assistance to Indian aging programs. A further point was made with regard to individuals as a potential source of funding: it was stated that 83% of all philanthropic gifts (totalling in excess of $44 billion) come from individuals.

Furthermore, it was noted that, of the more than 640 potential sources of funding for Indian programs and benefits, only 79 of them are presently being utilized. All too often, the tribes and agencies seeking funds have continued to "knock on the same doors" going to the same sources repeatedly until, eventually, the resources are depleted.

If then, all of these potential soures await some tribe or agency to avail themselves of them, how can this be done? That too, was discussed in this workshop, and methodologies for successful fundraising efforts were spelled out by the panelists.

There was another very important matter which was mentioned in this workshop, and one which has had far-reaching (even devastating) effects on the strength of a people seeking assistance: it is the matter of an ever-growing dependency on federal funding and a resultant debilitation of those who seek "handouts" instead of genuine assistance to enable them to help themselves. It was best put by one of the workshop panelists who said: "Dependency on federal government is pernicious, because it destroys self-initiative." The most successful and prosperous tribes have been those who practiced careful stewardship of the funds which were given to help them with their programs; these are the tribes which have developed healthy enterprises through sound administrative and fiscal practices.

INTERGENERATIONAL PROGRAMS

PANELISTS: **Robert Pinezaddleby,**
Ken White,
Ory Cuellar

This workshop focused on two major issues:

1. The use of elders as resource persons,
2. use of elders as volunteers.

The elders have many things to offer as resource persons. They have lived a long time, and experienced many things that younger people have not yet known. The elders, through the experiences of life, have learned to solve problems and have found ways of coping with daily problems. The use of elders as resource persons does not have to be in a formal setting; as children and young people learn from just being with them, and listening to what they have to say. Many times, an informal setting has the most impact.

The benefits to be derived from using elders as volunteers were emphasized by examples of steps taken by the Navajo Nation to involve elders in a Foster Grandparents Program through ACTION. The benefits were felt by both elders and young people alike. Indeed, one of the best ways to pay tribute to these elders, is to utilize them in practical roles such as these.

BASICS OF THE OLDER AMERICANS ACT

PANELISTS: **Lee Bourgeau,** Director of the Area Agency on Aging for the Federated Tribes of Colville, Washington.

This was one of the workshops designed especially to inform elders about the Act, the programs within the Act, and the administrative structures through which the programs are implemented. In summary, the Act was described as follows:

The Act, consisting originally of seven Titles, has been amended ten times since its original passage in 1965. As it exists today, it is made up of six Titles which are described as follows:

TITLE I — this title gives the objectives of the Older Americans Act, and states that "elders should be enabled to live in dignity, and improve their health, housing, nutrition, and social environments; and to be assisted into entitlement services."

TITLE II — gives authorization to the Administration on Aging to carry out the law, and names the position of the Commissioner on Aging as authorized to carry out steps in the various titles. The title also states that Title V of the Act will be transferred to the Department of Labor for administration due to the fact that Title V is basically an employment issue.

TITLE III — provides grants to states through their state office on Aging. The State Office on Aging is authorized to make allocations to various requesting agencies and non-profit programs based on a set of justifying criteria. The receiving agencies may then divide up the monies received among other programs to provide direct services. The Title is divided into other sub-titles:
IIIb providing money for social services, and accessing efforts; and IIIc which provides assistance for nutrition programs and for buying food, congregate meals, and home delivered meals.

TITLE IV — Provides for research and demonstration projects, National Impact projects; such organizations as NICOA, Pacific-Asian programs, National Black Caucus on Aging, and the National Hispanic Aging Organization are supported under this title.

TITLE V — an employment title, was transferred from AoA to the Department of Labor. It provides slots (allocated by DOL) to National organizations to fill temporary part-time positions in tribal and minority programs. Similar to CETA positions.

TITLE VI — this title was established as a result of the 1978 amendments to the Act. This title came as a result of the requests of Indian tribes throughout the nation for "direct funding" of local nutrition programs which provide home-delivered and/or congregate meals to the elderly. Through the Title, tribes are permitted to determine their own definitions of "elderly" after meeting certain basic elderly population requirements (i.e., must have a minimum elderly population of 75 people who are 60 years of age or older).

CIVIL RIGHTS OF INDIAN ELDERS

PANELIST: **Gerald Wilkinson,** National Director of National Indian Youth Council

Mr. Wilkinson addressed a number of issues which relate to Indian Civil Rights in general, speaking of the maintenance of their tradition and language as being vital to their most basic right: the right to exist as people. It was intimated that, when people begin to lose their "Indianness" through the atrition of their language and culture, they are also losing those qualities and values of their life which have combined over the years to make them unique. This, of course, leaves a void in their lives which is easily encroached upon by invading foreign values and the demands of an unfamiliar (and sometimes unfriendly) society; all of these contriving against the person's retention of his civil rights. This is especially so in the case of an Indian whose very identity is inexorably bond up in his religion, tradition, and language.

Because of this close interrelationship of the religion and culture of the Indian with his basic human rights, it was inevitable that there should be some discussion of the Indian Religious Freedom Act in connection with this workshop. Besides the fading of language and culture, other factors which mitigate against the Indian's survival as a people were discussed. Among these was the crisis repeatedly mentioned in other workshops: the drastic cut-backs in funding for Indian programs. It was remarked that programs had been cut back from the Indian category at a rate which was ten times that of any other category. These conditions, of course, threaten seriously both the health and economy of the Indian elderly; hence: their civil rights.

which emphasize heavily cultural appreciation and cultrually-oriented curriculum materials; 3) using nutrition centers and senior centers as socialization and cultural appreciation sites; and 4) a re-emphasis (in some cases a revival) on the part of the Indian people themselves of the distinctive traditions which make them unique.

All in all, it was underscored again and again; the Indian and Alaskan Native tradition is a treasure worth keeping, just as the elderly themselves are a treasure worth loving.

MONEY MANAGEMENT

MODERATOR: **Jean Hunt,** NICOA staff member

The money management workshop began with a definition of values. The participants gave examples of values they themselves held, and how these values influenced their spending habits. Going to traditional events was one of the values identified and discussion followed which indicated the fact that many elderly would sacrifice other needs and wants in order to have gas money for traveling to one of the these traditional events. Therefore, it was determined, that a person's values pretty much determine his spending habits.

A review of past spending and lessons learned from "foolish" spending were matters discussed by elders in the workshop audience. There was also some group participation in discussing ways of saving money. Elders identified Certificates of Deposit as a wiser method of saving money than a regular savings account. They also suggested other means such as providing in-kind provisions of items which they would normally spend money on; and a mutual assistance attitude on the part of elders in which they might share together to see that everyone has his/her needs met. This particular suggestion constitutes yet another "tribute" to the elders who were in attendance at the workshop.

THE AGING PROCESS

PANELIST: **Dr. William Freeman,**

Dr. Freeman, a medical professional, discussed the physiological changes and types of diseases which are likely to occur in later years. There was a detailed discussion of specific parts of the body system and body functions, changes which could be expected, and the malfunctions or diseases related to these systems. Some preventive information and health maintenance information was also provided for those who were present.

The seniors present participated freely with their questions and comments.

WAKE UP TO EXERCISE

PANELIST: **Kenneth Cody,**

This was one of the more enjoyable workshops for the elderly as they were encouraged to participate very actively in the exercises which were demonstrated. Obviously, as was pointed out in the workshop, exercise is basic to the maintenance of the health of the elderly, and good health has far-reaching and direct effects on their mental and emotional well-being. Many of the elderly who participated in the workshop were able to take home with them information which they themselves will be able to use in their daily activities, and which will result in improved health for them in the days to come.

LOOKING AHEAD

It would be an unfortunate thing if a conference such as the Fourth National Indian Conference on Aging were to be allowed to just fade into past history with no on-going effect and follow-up. But NICOA and the conferees have taken decisive action to see that an effective and appropriate national policy is formulated, and NICOA plans further action on the policy by pursuing it all the way through to its actual implementation. Those in attendance at the conference designed and passed Resolution 6 (see Appendix), which is essentially a position statement and a proposed policy with implementation steps. However, subsequent to the conference, NICOA has proceeded a step farther in putting together a definitive National Impact Proposal to be submitted to the Administration on Aging. Portions of that proposal, stating the objectives, methodology, and expected outcome are found immediately following:

NATIONAL INDIAN COUNCIL ON AGING, INC.

SUMMARY OF PROJECT

SUMMARY OF PROJECT

Objective - To improve the economic and social well-being of 109,000 older Indian and Alaskan Natives through the development of a comprehensive National Indian Policy on Aging, which will ensure that special needs unique to this group are addressed efficiently and effectively.

Methodology - To work with AoA and other relevant agencies in setting a mutually agreeable direction through which the policy will be developed. To hold regional meetings at which testimonies and documents of concern will be received to develop the policy from the analyses of their input and to work Expected Results or Products - with AoA in implementing the finished policy. The expected result is that more Indian and Alaskan Natives will receive services which are uniquely suited to their needs and administered sensitively and in a culturally accepted manner. This will increase participation in programs of this group of elderly thereby improving their economic and social well-being. The proposed policy will ensure that these services are provided efficiently and effectively resulting in a savings of program funds and an upgrading of livelihood among the Indian and Alaskan Natives.

GOAL: To improve the economic and social well-being of 109,000 older Indian and Alaskan Natives through the development of a comprehensive National Indian Policy on Aging, which will ensure that special needs unique to this group are addressed efficiently and effectively.

OBJECTIVE 1.: To discuss the development of a National Indian Policy on Aging at a meeting between the Administration on Aging and NICOA's Executive Committee for the purpose of setting a mutually agreeable direction.

Task 1.1.: To schedule a meeting in Washington, D.C. between AoA, relevant agencies, and NICOA's Executive Committee during the month of October 1982.

A. To contact the Administration on Aging and coordinate the meeting arrangements.
B. To locate meeting facilities.
C. To arrange for NICOA's Executive Committee Members to be present at the meeting.
D. To arrange for a NICOA staff member to be present at the meeting.

Task 1.2.: To set mutually agreeable directions for the development of policy issues.

A. To prepare a written work agreement.
B. To identify liaison persons who will be responsible for maintenance and communication.

OBJECTIVE 2.: To inform Indian and Alaskan Natives throughout the nation of the policy development via NICOA's Indian network (NICOA's 39 Council Members, 8 state Indian councils on aging, 84 Title VI grantees, newsletter to Indian tribes and groups, and national Indian organizations).

Task 2.1.: To prepare a news release pertaining to the policy development and the forthcoming invitation for testimonies and submission of documents.

Task 2.2.: To disseminate this information to the Indian constituency through the 39 Council Members, 8 state Indian councils on aging, 84 Title VI grantees, and newsletters (UPDATE and QUARTERLY).

Task 2.3.: To publish four issues of the NICOA UPDATE which will specifically address this National Impact Project; each Program Year this newsletter is normally published each month or twelve issues. Only the four issues mentioned will be funded through this project, the remaining eight issues will be funded by other sources. Dissemination will be made to over 450 individuals and organizations.

Task 2.4.: To publish two issues of the NICOA QUARTERLY to keep the elderly constituency informed of NICOA's activities in this National Impact Project; each Program Year this newsletter is normally published every three months or four issues. Only the two issues mentioned will be funded through this project, the remaining two issues will be funded through other sources. Dissemination of this publication is to over 1,500 individuals and organizations.

NATIONAL INDIAN COUNCIL ON AGING, INC.

VI. LOOKING AHEAD

OBJECTIVE 3.: To receive and gather policy input from Inidan and Alaskan Native groups at three area-wide meetings.

Task 3.1.: To schedule three regional meetings at locations selected that are easily accessible to the Indian community.

Task 3.2.: To coordinate meeting arrangements at each site.

Task 3.3.: To arrange for NICOA Board of Directors to be present at the meeting.

Task 3.4.: To arrange for NICOA staff persons to be present for the meetings as on-site technical support to the Board Members.

Task 3.5.: To analyze testimonies and other written documents after each area meeting at NICOA's headquarters.

OBJECTIVE 4.: To analyze the input received and gathered at the area-wide meetings and develop a draft of the National Indian Policy on Aging.

Task 4.1.: To incorporate the concerns expressed in the testimonies and written documents into a draft policy.

OBJECTIVE 5.: To present the draft of the National Indian Policy on Aging at the Annual Meeting of the National Indian Council on Aging for review, amendments and adoption (this objective will be funded through other sources).

Task 5.1.: To schedule the Annual NICOA Council Meeting at a site determined by the Board of Directors.

Task 5.2.: To coordinate meeting arrangements with local resources (motels, conference rooms, etc.).

Task 5.3.: To arrange for the NICOA Council Members to be present at the Meeting (travel, lodging, etc.).

Task 5.4.: To conduct meeting activities and present the draft policy for review, amendments, revisions, and adoption.

Task 5.5.: To publish NICOA's adopted National Indian Policy on Aging and make available to the Indian and Alaskan native constituency and federal departments and agencies.

OBJECTIVE 6.: To meet with the Administration on Aging and relevant agencies to review NICOA's National Indian Policy on Aging, to negotiate policy provisions which are relevant and mutually agreeable, and to develop a plan of implementation.

Task 6.1.: To schedule a meeting with the Administration on Aging and relevant agencies.

Task 6.2.: To arrange for NICOA's Executive Board Members and one staff member to be present at the meeting.

Task 6.3.: To review NICOA's National Indian Policy on Aging and negotiate the provisions to establish a final policy for implementation.

OBJECTIVE 7.: To develop three more state Indian councils on aging beyond the eight that are now organized (Washington, Oregon, Idaho, California, Nevada, Arizona, New Mexico, and Oklahoma); (this objective will be funded from other sources).

OBJECTIVE 8.: To provide 20 man-days of training and technical assistance to Indian groups and organizations that have aging concerns or programs (this objective will be funded from other sources).

OBJECTIVE 9.: To attend national Indian and non-Indian conferences to maintain a cross-organizational exchange of information where the sponsoring national organization will cover the necessary travel expenses for NICOA.

OBJECTIVE 10.: To continue to provide on an on-going basis, information and referral services to the Indian aging constituency (this objective will be funded from other sources).

APPENDICES

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NATIONAL INDIAN COUNCIL ON AGING, INC.

RESOLUTION
OF THE NATIONAL INDIAN COUNCIL ON AGING

RESOLUTION NO. 82-1

REQUESTING THE 4th NATIONAL INDIAN CONFERENCE ON AGING TO DIRECT THE COMMISSIONER OF THE ADMINISTRATION ON AGING TO CONFIRM WITH RECOMMENDATIONS MADE BY VARIOUS INDIAN TRIBES TO ESTABLISH AN AGING POLICY FOR ALL INDIAN TRIBES, INDIAN AGING POLICIES.

WHEREAS, the Navajo Nation Council on Aging has been designated and delegated the responsibility to advise, advocate on all activities relative to aging programs; and

WHEREAS, the Navajo Nation Council on Aging has submitted a resolution and a recommendation to the 1981 White House Conference on Aging in Washington, D.C. to establish an Indian aging policy for all Indian tribes by all federal agencies that provide services to Indian elderly has trust responsibilities; and

WHEREAS, the Navajo Tribe's Aging Service Department (Area Agency on Aging) has submitted to the Commissioner of the Administration on Aging on June 7, 1982 recommendations on the establishment of the Indian Aging Policy; and

WHEREAS, the Commissioner of the Administration on Aging direct and coordinate the establishment of the aging policies with the federal agencies with input from the Indian tribes through the National Indian Conference on Aging; and

WHEREAS, the Navajo Tribe was notified on July 13, 1982 of the decision to draft the Indian Aging Policy by staff of the Administration on Aging without input from other federal agencies and Indian tribes.

NOW THEREFORE BE IT RESOLVED, that the Navajo Nation Council on Aging request the 4th National Indian Conference on Aging to reaffirm the recommendation that was submitted by the Navajo Tribes' Aging Service Department (Area Agency on Aging); to further direct the Commissioner of the Administration on Aging, to convene representatives from the Bureau of Indian Affairs, Indian Health Service, Housing and Urban Development, Department of Labor, other federal agencies and Indian tribes to draft an Indian Aging Policy; to submit the Indian Aging Policy draft to all Indian tribes for their review and make additional input before the draft is finalized; and to direct Commissioner of the Administration on Aging to coordinate all activities relative to the establishing of the Indian Aging Policy with the National Indian Council on Aging staff and Council.

NATIONAL INDIAN COUNCIL ON AGING, INC.

RESOLUTION
OF THE NATIONAL INDIAN COUNCIL ON AGING

RESOLUTION NO. 82-2

ENDORSING AND SUPPORTING THE 4th NATIONAL INDIAN CONFERENCE ON AGING

WHEREAS, it is imperative that the National Indian Conference on Aging focus on the diversity and strengthening of the Indian elderly.

WHEREAS, that each community have equal access and opportunity to receive needed services.

WHEREAS, it is very desirable that the Crownpoint Chapter and community people support the goals and objectives for the National Indian Conference on Aging.

NOW THEREFORE BE IT RESOLVED, that the Crownpoint Chapter and the community people hereby select topic areas which we consider to be the most important topics for consideration: direct federal funding to Indian tribes; nutritional needs of the elderly; abuse and neglect of the elderly; pensions and Social Security for the elderly; community support and housing; government policies toward elderly; long-term care for elderly; the elderly and family values; cultural diversity and national policies; the single senior citizen; support services for the elderly; and health care services for the elderly. The Crownpoint Chapter requests the National Indian Conference on Aging for consideration on the above mentioned issues.

NATIONAL INDIAN COUNCIL ON AGING, INC.

RESOLUTION
OF THE NATIONAL INDIAN COUNCIL ON AGING

RESOLUTION NO. 82-3

REQUESTING THE NATIONAL INDIAN CONFERENCE ON AGING TO FORWARD ANY RESOLUTIONS TO THE CONGRESS OF THE UNITED STATES, THE SECRETARY OF THE DEPARTMENT OF HEALTH AND HUMAN SERVICES, AND THE COMMISSIONER OF THE ADMINISTRATION ON AGING.

WHEREAS, the Conference Salish & Kootenai Tribes, and the Elderly Indian Program Coordinator has met with the reservation-wide Senior Citizen groups to assess their needs; and

WHEREAS, based upon their input, it has been stated that their areas of concern are: 1) combine appropriations for Title III and Title VI, in order for tribes to combine services; 2) increased appropriations for elderly programs in order to provide all needed services; 3) request IHS continue to exist or appropriate monies to the Older Americans Act to continue Home Health Care; 4) need more monies appropriated for Health Education; 5) revised HUD's policies on age limit for qualifying for HUD ownership; and 6) Social Security policies should allow widows to draw their husband's full benefits from Social Security and pensions.

NOW THEREFORE BE IT RESOLVED, that the 4th National Indian conference on Aging take into consideration the above mentioned concerns for incorporation into any resolutions formally passed at this Conference to be forwarded to the Congress of the United States, the Secretary of the Department of Health and Human Services and the Commissioner of the Administration on Aging.

NATIONAL INDIAN COUNCIL ON AGING, INC.

RESOLUTION
OF THE NATIONAL INDIAN COUNCIL ON AGING

RESOLUTION NO. 82-4

OPPOSING THE PROPOSED ELIMINATION OF THE COMMUNITY HEALTH REPRESENTATIVE PROGRAM.

WHEREAS, the Community Health Representatives have in the past several years, established themselves as a vital link between health care providers and Indian communities by providing many preventive and home health care types of services in a non-clinical setting; and

WHEREAS, health care needs of the Indian elderly require many services which are currently only being provided by Community Health Representatives Program as proposed under the Reagan Administration budget to FY 83 would place the health of many Indian elderly at risk by removing the only health care program which has proven successful in providing the unique types of services required by this age group.

NOW THERE BE IT RESOLVED, that the National Indian Council on Aging strongly opposes any efforts to eliminate the Community Health Representatives Program; and

BE IT FURTHER RESOLVED, that the National Indian Council on Aging recommends increases in the Community Health Representatives FY 83 budget to provide for the unique health needs of the Indain elderly.

NATIONAL INDIAN COUNCIL ON AGING, INC.

RESOLUTION
OF THE NATIONAL INDIAN COUNCIL ON AGING

RESOLUTION NO. 82-5

REQUESTING THE NATIONAL INDIAN CONFERENCE ON AGING TAKE THE NECESSARY STEPS IN SUPPORTING AND REQUEST FOR CONTINUED FUNDING FOR THE ELDERLY HOME CARE SERVICES WITH OPERATION FUNDS AND STAFF.

WHEREAS, the Senior Citizen Council has been delegated by the Aneth, Utah Chapter to advocate on behalf of the elderly of Aneth, Utah; and

WHEREAS, the Senior Citizen Council recognizes the need to advocate and support the operation of the Elderly Home Care Services; and

WHEREAS, the Elderly Home Care Services has provided temporary shelter, personal grooming, transportation assistance, shopping assistance and home delivered meals to the community elderly for FY 81 and FY 82; and

WHEREAS, the community has a large numbered population of elderly people who are in desperate need of an Elderly Home Care Services and a Senior Center. The elderly people can also go for advice, counseling, make appointments and be referred to areas of need.

THEREFORE BE IT RESOLVED, that the National Indian Conference on Aging supports continuation of operating funds for the Elderly Home Care Services, and Senior Centers now funded by Title III; the National Indian Conference on Aging recognizes the need to facilitate these services to the Navajo elderly and enhance the present operation of the home; more specifically, the home is in need of additional staff and vehicle, funding for recreation and monies to improve the physical aspect of the home; and the Navajo Aging Services Department will provide technical assistance to the staff and the elderly of Aneth, Utah.

NATIONAL INDIAN COUNCIL ON AGING, INC.

RESOLUTION
OF THE NATIONAL INDIAN COUNCIL ON AGING

RESOLUTION NO. 82-6

ACCEPTING THE DRAFT PAPER SUBMITTED BY NICOA STAFF FOR THE DEVELOPMENT OF THE NATIONAL INDIAN AGING POLICY.

WHEREAS, the National Indian Conference on Aging convened for the purpose of considering resolutions to develop and form a National Indian Aging Policy; and

WHEREAS, the tribal leaders, program administrators and the Indian elder constituency involved in developing an Indian Aging Policy were present as conferees;

NOW THEREFORE BE IT RESOLVED, that the attached Draft Paper submitted to the National Indian Conference on Aging be accepted as the basis for the continued working relationship with those agencies involved to develop the National Indian Aging Policy.

DRAFT PAPER

ADOPTED AND PASSED BY RESOLUTION AS RESOLUTION NO. 6
BY THE NATIONAL INDIAN COUNCIL ON AGING (CONFERENCE RESOLUTION).

NATIONAL INDIAN AGING POLICY

Purpose: The need for the development and implementation of a National Indian Aging Policy (NIAP) has existed since the inception of the nation's concern for its elderly. Services that have been developed as a result of the various White House Conferences on Aging have been institutionalized and have varied little since its implementation. Services to the Indian elderly have been fragmented, uncoordinated, and usually inappropriate to the cultural millieu of the American Indian. It is the purpose of this policy to develop comprehensive services to the nation's Indian elderly that is commensurate with their needs, regardless of where they reside. These services must comply with the following principles;

1. That the American Indian Community is a unique and sacred culture and that all efforts must be expended to insure that its continued existence becomes a moral obligation that the United States Government supports.
2. That the Indian community's right to existence be reflected in the provision of services that enhance the cultural uniqueness, rather than the implementation of services that desecrate and undermine the integrity of the Indian culture.
3. That the federal government enhance and reaffirm its commitment to those tribes with which it has a treaty or legal obligation.

POLICY STATEMENT

It is the policy of the United States Government that all Indian elderly of the United States shall receive services to which they are entitled and that these services be provided in a manner to which they are accustomed and in a comprehensive and coordinated manner. Further, it shall be the policy of the United States Government that it will undertake and implement legislation, regulatory changes, and policy changes to insure that this policy is implemented.

BENEFICIARIES:

It is the purpose of this policy that all Indian elderly be entitled to services emanating out of this policy. This shall include federally-recognized Indian tribes, Indians residing in urban areas, and State-recognized Indians. Mechanisms shall be developed that will vary with the legal status of the aforementioned Inidan communities to insure that this policy is implemented.

IMPLEMENTATION

To insure the expeditious implementaton of this policy, the following shall be necessary:

1. That the Congress of the United States shall monitor the implementation of its policy through hearings and its legislative and appropriation processes;
2. That the Congress of the United States shall appoint an Indian Elderly Advisory Council to serve as an advisory group;
3. That the Administration on Aging be the departmental organization designated to coordinate the development and implementation of all activites, while consulting the Indian Elderly Advisory Council; among and between the various federal agencies and departments.
4. That the Administration on Aging develop an Indian aging desk that shall be empowered to implement and monitor the policy upon its completion.

5. That the National Indian Council on Aging continue to serve as the nation's resource center on Indian aging issues and concerns.
6. That the specific concerns, needs, and recommendations to alleviate these needs be those that have been developed and adopted by the conferees to the 1971 and 1981 White House Conferences on Aging.
7. That the various levels of State, County and local governments be assigned responsibilities to their Indian constituencies and that these be clarified to insure that there are coordinated responsibilities.
8. That the U.S. Civil Rights Office be empowered to ensure that these policies are implemented by the various levels of government.

AFFECTED DEPARTMENTS

The following list of departments and agencies are examples of organizations that shall be required to assist in the development and implementation of the policy (they are not meant to be inclusive, there are others that might be overlooked)

1. Department of Health and Human Services
2. Department of the Interior
3. Department of Labor
4. Department of Transportation
5. Department of Education
6. Department of Commerce
7. Department of the Treasury
8. Department of Agriculture
9. ACTION
10. Department of Justice
11. Others

NATIONAL INDIAN COUNCIL ON AGING, INC.

RESOLUTION
OF THE NATIONAL INDIAN COUNCIL ON AGING

RESOLUTION NO. 82-7

REQUESTING AN INDIAN POLICY TO IDENTIFY NEEDS OF URBAN INDIAN ELDERLY.

WHEREAS, the American Indian Elders of Seattle, Washington belong to different tribes; and

WHEREAS, the American Indian Elders of Seattle, Washington are proud to be Indians of America, whether they belong on the reservations or off the reservations; they are not refugees from other countries but belong here and consider themselves American Indians; and

WHEREAS, the federal financial assistance to state and local governments should focus on urban Indian elderly to do a research on our most unique needs; and

WHEREAS, that the services from area agencies be developed to be funded by Title III; and

WHEREAS, the American Indian Elders of Seattle, Washington want assurance to provide the urban elders in cities and to tribal elders in the Northwest with services; and

WHEREAS, the American Indian Elders of Seattle, Washington want to promote their issues on the National Indian Council on Aging; and

WHEREAS, the National Indian Council on Aging should consider the needs of the urban elders in the future, to enforce and act on those needs; and

WHEREAS, the urban elders want to be united and coordinate with other Indian elders' programs on the reservatons; and

WHEREAS, the urban elders agree to have the development of a national Indian aging policy; and

WHEREAS, the urban elders face problems of being city elders to environment communities and want response to our issues and to what role is of various organizations; and

NOW THEREFORE BE IT RESOLVED, that the urban Indian elders represent and express the specific unique needs of Indian elders and want to work together and use our strength to work on keeping our Indian Health Clinics open by the following:

1. Supporting and helping to keep the Indian Health Service open;
2. Helping to keep our chore services, Home and Health Care Services and Homemaker Services for the handicapped;
3. Keeping the Indian Health Clinic open for the big majority of Indian people in

Seattle that are old or young who depend on Indian Health Service where they provide medical service and check-ups annually; and

4. Making available a center for the urban Indian elders to display arts and crafts for sale, as well as other services, such as nutrition, transportation for trips, activities, meetings, the carrying on of Indian culture and tradition, education, and support for grants for the Washington State Indian Council on Aging to include get-togethers where dinners are provided for other Indian elders from other organizations at conferences.

BE IT FURTHER RESOLVED, that other State Indian Councils on Aging get together in the future and compare notes to help out one another and formulate the ideas to meet the needs of other programs in different areas of service.

NATIONAL INDIAN COUNCIL ON AGING, INC.

RESOLUTION
OF THE NATIONAL INDIAN COUNCIL ON AGING

RESOLUTION NO. 82-8

MONTANA INTER-TRIBAL POLICY BOARD RESOLUTION TO SUPPORT RETENTION OF CURRENT TITLE VI ALLOCATION FORMULA.

WHEREAS, the Montana Inter-Tribal Policy Board is composed of, belongs to, and serves at the direction of the eight Indian Tribal Councils of Montana; and

WHEREAS, the Montana Inter-Tribal Policy Board has been organized to represent, develop, protect, and advance the economic, cultural, and racial well-being of Indian people in the State of Montana; and

WHEREAS, the Montana Inter-Tribal Policy Board represents all the Montana reservation Title VI tribal elders programs; and

WHEREAS, it has been proposed that the Title VI allocation formula be revised to be based entirely upon population instead of the current base amount allocations; and

WHEREAS, such an action would produce severe reductions in Title VI allocations for Montana tribal elderly programs and probable closures for several tribal senior centers, while a few large tribes would actually receive substantial funding increases; and

WHEREAS, the Montana Inter-Tribal Policy Board believes the intent of the Title VI program to be to benefit all tribes, and not merely a few of the larger tribes with greater populations and resources; now:

THEREFORE BE IT RESOLVED that the Montana Inter-Tribal Policy Board strongly supports retention of the current Title VI allocation formula, with base amounts regardless of population.

NATIONAL INDIAN COUNCIL ON AGING, INC.

RESOLUTION
OF THE NATIONAL INDIAN COUNCIL ON AGING

RESOLUTION NO. 82-11

REQUESTING THE NATIONAL INDIAN COUNCIL ON AGING TO AMEND ITS BY-LAWS TO INCLUDE TITLE VI PROGRAM REPRESENTATION ON THE BOARD OF DIRECTORS OR NATIONAL INDIAN COUNCIL ON AGING.

WHEREAS, the OAA Title VI program directors are concerned with the lives of our Indian elders; and

WHEREAS, the Title VI program is the program designed to meet the needs of our Indian elders; and

WHEREAS, the National Indian Council on Aging composition leave out the perspective and concerns;

NOW THEREFORE BE IT RESOLVED that the National Indian Council on Aging amend its by-laws to include Title VI program representation on the Board of Directors or National Indian Council on Aging.

BE IT FURTHER RESOLVED that the Title VI program directors coalition meeting on August 24, 1982 at the National Indian Conference on Aging that a coalition formed for that purpose shall name the individual representative.

NATIONAL INDIAN COUNCIL ON AGING, INC.

RESOLUTION
OF THE NATIONAL INDIAN COUNCIL ON AGING

RESOLUTION NO. 82-12

REQUESTING THE NATIONAL INDIAN COUNCIL ON AGING TAKE INTO CONSIDERATION THE LISTED PRIORITIES DETERMINED AT THE WASHINGTON ELDERS' ISSUES CONFERENCE HELD AT THE WAPATO LONGHOUSE, ON JULY 22 AND 23, 1982.

WHEREAS, the Indian elderly of the Washington State Tribes are eleigible for services provided under the Older Americans Ace of 1965; and

WHEREAS, many of the Indian elderly who reside in non-Indian public service areas receive little or no services that they are eligible for; and

WHEREAS, older Indians prefer to remain in their traditional homes and surroundings as opposed to new H.U.D. homes and prefer in-home care as opposed to being institutionalized; and

WHEREAS, the remoteness from the nearest access service center denies the Indian elderly regular physical, prescription, and convenience care such as shopping, medical appointment, etc.; and

WHEREAS, the eligibility requirements for benefits to Indian elderly are not realistic and their current income status is not sufficient to meet their daily needs.

NOW THEREFORE BE IT RESOLVED that the National Indian Council on Aging take into consideration the listed priorities determined at the Washington Elders' Issues Conference held at the Wapato Longhouse on July 22 and 23, 1982 and consider further our strong recommendation that direct federal funding be instituted at the earliest possible date.

NATIONAL INDIAN COUNCIL ON AGING, INC.

RESOLUTION
OF THE NATIONAL INDIAN COUNCIL ON AGING

RESOLUTION NO. 82-15

REQUESTING THAT THE NATIONAL INDIAN COUNCIL ON AGING WILL ADVOCATE AND INCLUDE THE URBAN INDIANS IN THEIR POLICIES AND RECOMMENDATIONS.

WHEREAS, a large portion of our Indian elderly now reside in urban areas across the United States; and

WHEREAS, these Indian elderly have contributed much to the younger Indian generation in keeping alive Indian cultural and tradition that they received from their ancestors on reservations and tribal lands; and

WHEREAS, now they have been assimilated into urban areas due to economics, politics, and/or family ties, they suffer from the lack of nutrition, health care, and Indian social life they are accustomed to and are not equitably served by city, state or federal elderly programs.

THEREFORE BE IT RESOLVED that the National Indian Council on Aging will advocate and include the urban Indians in their policies and recommendations to make programs and funding available to urban Indians under Title VI.

NATIONAL INDIAN COUNCIL ON AGING, INC.

RESOLUTION
OF THE NATIONAL INDIAN COUNCIL ON AGING

RESOLUTION NO. 82-16

A RESOLUTION OF THE NAVAJO FOSTER GRANDPARENT/SENIOR COMPANION PROGRAM VOLUNTEERS, NAVAJO NATION.

WHEREAS, the Navajo Foster Grandparent/Senior Companion Program Advisory Board is a requirement of ACTION, the Federal Volunteer Agency; and

WHEREAS, the Navajo Foster Grandparent/Senior Companion Advisory Board is comprised of five (5) Foster Grandparents and five (5) Senior Companions elected by their peers, representing 230 elderly volunteers from 88 sites on the Navajo Nation; and

WHEREAS, the Navajo Foster Grandparent/Senior Companion Advisory Board through personal experience is most knowledgeable of specific concerns that directly effect the elderly volunteers and clients served, particularly high-risk elderly and children with special needs; and

WHEREAS, the Navajo Foster Grandparent/Senior Companion Program volunteers, through local community forums prioritized recommendations to the 1981 White House Conference on Aging, and the Advisory Board has recently met with the elderly volunteers for purposes of preparing and approving the following recommendations for submittal to the Fourth Annual National Indian Conference on Aging, August 23, 24 and 25, 1982, in Reno, Nevada.

THEREFORE BE IT RESOLVED that the Navajo Foster Grandparent/Senior Companion Program volunteers, through its Advisory Board, recommends to all tribal and federal agencies responsible, to: 1) raise the volunteers stipend to $2.50 per hour; elderly volunteers, providing an identified needed service, currently receive $2.00 an hour. Because of inflation, reduction in benefits and income, and extreme need, the volunteers, all of whom are under the national poverty level, requests at least $2.50 per hour be considered and approved by federal and tribal sources of funding; 2) raise the approved volunteer mileage reimbursement to a minimum of 24 cents per mile; the Foster Grandparent and Senior Companion volunteers provide personalized attention to needy children and in-home care clients daily in rural, isolated areas, using their own vehicles. With fuel costs near $1.85 cents per gallon in many rural areas, an increase in allowable volunteer mileage reimbursement, and appropriation of such funds, using public and private sources is necessary to

NATIONAL INDIAN COUNCIL ON AGING, INC.

RESOLUTION
OF THE NATIONAL INDIAN COUNCIL ON AGING

RESOLUTION NO. 82-17

A RESOLUTION TO RECOGNIZE INDIAN ELDERLY AS RESOURCES AND CONTRIBUTORS IN MEETING THE SPECIAL NEEDS OF CHILDREN AND ELDERLY TRIBAL MEMBERS.

WHEREAS, the Nations's Indian elderly are recognized and acknowledged to be honored among all Indian tribes; and

WHEREAS, in recent years there are increased evidence and documentation of Indian elderly abuse and neglect in economic, health, social and family settings, which as a result, has grown to be a priority concern among Indian tribes and elders; and

WHEREAS, the elderly can be utilized as resources to meet the needs and problems of each family and community by contributing their knowledge in education, health, social and family settings, including priority concerns of 1) abuse and neglect of elders; 2) development of intergenerational programs for unifying Indian elderly and children; 3) delivery of mutually beneficial in-home care to their peers; 4) preservation of the Indian culture, traditions, identity, respect and spirituality.

NOW THEREFORE BE IT RESOLVED, the National Indian Council on Aging, through its Executive Board, Executive Director and staff, assemble, appropriate information, and resources, including an Indian Intergenerational Task Force, knowledgeable of related concerns, to aid all interested tribes and urban centers in development of 1) necessary protection CODES AND LAWS for elderly to prevent and minimize neglect and abuse; 2) culturally relevant intergenerational and in-home care programs for preservation of Indian families and extended families; 3) proper identification of applicable public and private funds, and advocacy plans to secure such funds; immediate recognition, implementation and follow-up on twenty-seven (27) recommendations formally developed and adopted at the Third Annual National Indian Conference on Aging in Albuquerque, New Mexico be timely addressed and implemented by the National Indian Council on Aging and all responsible federal agencies; immediate implementation and follow-up on numerous recommendations submitted and adopted by the 1981 White House Conference on aging, regarding Older Americans as a Continuing Resource, a workshop topic, be done by the National Indian Council on Aging and all responsbile federal agencies.

The workshop, if it had talked only of the threats and problems, would not have been truly beneficial to those who attended. Therefore, definitive and positive counter-active steps were suggested which would not only ensure the retention of civil rights, but would also enhance the present circumstances of Indian elderly. One of the major solutions suggested was political activism, a process which very much involves the elderly among the tribes. Instances were cited in which not only was the larger percentage of the people who voted in a particular election elderly Indians, but also it became apparent that it was their vote which determined the outcome of the election. Further evidence was shared with the group that the ones who hold the keys to securing the civil rights of Indian elders are the elders themselves — as they teach the younger generations the values which will help to preserve their cultural integrity, and as these elders are the ones who can best speak for the rights of their people from a traditional and true Indian perspective. It was made clear through the discussions that to protect the rights of Indian elders is to protect the rights of the tribe.

A byproduct, but an important aspect of this workshop, was the provision of information, addresses, etc. which would be needed in any effort to correct situations in which the rights of Indian elders have been denied. It is all well and good to talk about protecting their rights, but someone (as in this workshop) needs to take the initiative to disseminate the pertinent information as to how to go about doing so.

RECORDING AND TEACHING TRIBAL TRADITIONS

PANELISTS: **Walter Moffett,** NICOA Chairman
Betty White,
Joe Abeyta, Sr., Santa Clara Pueblo

Much of the discussion in this workshop centered on the preservation of Indian religious rites. This is, no doubt, because the religion of Indian people is inseparably a part of his culture or tradition. It is clear that religion pervades every area of the Indian's daily life. His religion gives him a framework in which to interpret life's eventualities, and a spiritual base with which to face them. So, it was asserted, the preservation of religion is essential to their preservation as a people. In this sense, the workshop took on many of the characteristics of the workshop on Civil Rights of Indian Elders.

It was suggested that elders play a key role in the preservation of tradition, it is they who relied on it to the fullest extent in their own lives. The utilization of these elders as resource people in the schools (even from the earliest grades) was felt to be a vital part of preserving the tradition and instilling in the younger generations an appreciation for their own cultural heritage.

However, the younger generation should not be the only target group for this emphasis on retention of the native religion and tradition. The elders themselves derive a sense of self-worth and dignity (as they should) from the freedom to express their values and teachings. This was effectively accomplished among some of the Alaskan Native people in the villages of the Bering Straits through the conducting of elders' conferences, at which they gathered to sing their songs, perform their dances, and share their old ways. A video presentation was given in the workshop to show one such elder conference in progress. Efforts such as this are a very effective means of assuring the preservation and appreciation of the native tradition.

Some tribes, having grown concerned that a wealth of knowledge and wisdom was passing from the scene with the passing of some of their elders, have employed their elders to record their experiences, historical narratives and legends, and songs on tape. Some have developed sizeable collections of these tapes, so that this treasure will not be lost altogether.

There was also discussion of some of the things which tend to mitigate against the preservation of tradition and some ways of dealing with these factors were suggested. Among these methods were: 1) sharing the beauty and meaning of the traditions (as much as native beliefs would allow) with those of different cultural backgrounds to promote mutual understanding; 2) bilingual education programs

deliver dependable, effective services; 3) secure federal and tribal commitments to develop volunteer programs with focus on youth and high-risk elderly to strengthen Indian families; well planned use of elderly as resources and contributors to service needy elderly and youth with special needs, needs further development and commitment. Further program development through proper long range planning, clear and realistic priorities and funds available from Federal and Tribal sources is needed to further preserve and strengthen Indian family, traditions, and cultures; 4) development and funds for responsive transportaion systems; with a rural, isolated area, inaccessibility to vital social, health, and needed services is an existing problem. Further development, through coordination and identification of existing and new federal and tribal funds, is necessary to provide and ensure adequate transportation for Indian elderly; 5) recognize, utilize and develop all 1978, 1980 and 1982 National Indian Conference on Aging recommendations, and 1981 White House Conference on Aging recommendations related to the formally discussed topic of "Older Americans as a Continuing Resource" and subsequent written report adopted by the Conference; 6) coordination of all funds available to serve THE MOST NEEDY ELDERLY, including ACTION, Headstart, Indian Self-Determination Act, the Administration on Aging, and the Administration for Native Americans.

NATIONAL INDIAN COUNCIL ON AGING, INC.

1981 WHITE HOUSE CONFERENCE ON AGING:

THE INDIAN ISSUES

Previous White House Conferences on Aging in 1961 and 1971 set the framework for major changes and developments in U.S. aging policy and services — including Medicare, Medicaid, the Older Americans Act, and the present national aging network. In past conferences, however, Indian input has been minimal. It is our hope that the positions outlined here will contribute to a growing national awareness and acitivity on behalf of the Indian and Alaskan Native elderly.

The recommendations are based on proceedings of past National Indian Conferences on Aging, and especially on the 1980 National Indian Conference on Aging, which was designated a mini-White House Conference on Aging. The recommendations are divided into 14 topic areas, corresponding to the 14 committees of the 1981 White House Conference on Aging.

HEALTH CARE AND SERVICES

POSITION. It is the position of the National Indian Council on Aging that all Indian and Alaskan Native elderly receive the highest degree of health care and ancillary services.

BACKGROUND. The health status of the Indian population is significantly lower than that of the U.S. population, as shown by the fact that the life expectancy of Indian people is approximately eight years less than that of the general U.S. population. Major health problems of older Indian people include obesity, diabetes, hypertension, cancer, pneumonia, vision, and dental problems. Liver and kidney diseases are more prevalent in the Indian than the non-Indian population; tuberculosis is five times as common among the Indian population. On some reservations, as many as 40% of all adults have diabetes.

Health care for the Indian elderly is available through three major sources: Indian Health Service, Social Security Medicare and Medicaid. Barriers to utilization of available health services include lack of transportation, lack of information about health services, and lack of cultural sensitivity on the part of the health care providers. Additional barriers exist for urban Indian elders, who tend to seek only emergency medical care. Most urban areas lack health facilities for Indians, and many Indian elders have no insurance and insufficient income to pay for available helath care in urban areas.

Although mental health service delivery to the Indian elderly is minimal at this time, there is a definite need for further research on the mental health of Indian elderly, as well as appropriate treatment modes. Findings at present suggest that Indian elderly suffer from depression and anxiety at somewhat higher rates than do U.S. elderly as a whole.

The federal government has a trust responsibility to Indian people which includes the provision of quality health care and services. This unique relationship must be reaffirmed from time to time to remind the federal government of its commitment to Indian people.

RECOMMENDATIONS

1. U.S. policy should be changed to guarantee sufficient funds be allocated to finance quality health care and services to all elderly, including Indian and Alaskan Native elderly.
2. The Indian Health Service, in cooperation with the National Indian Council on Aging and the National Institute for Mental Health, should immediately develop a health policy for the Indian aging, to include physical and mental health and rehabilitation services. This policy should address health care for all Indian elderly — reservation, rural, and urban. This policy should be presented to Congress no later than December 1983.
3. All Indian Health Service facilities should immediately be upgraded to meet the standards of the Joint Commission of Accreditation of Hospitals, to become eligible for third-party reimbursement through Medicare and Medicaid.
4. Educational grants should be provided for Indians and Alaskan Natives who wish to pursue professional health careers.
5. Health education and training should be provided to elderly and, when appropriate, to their families, to ensure that the elder and/or caretaker is able to follow specialized dietary and health care regimens required by conditions such as diabetes and metabolic problems.
6. Funds should be made available to cover home health care costs. Indian tribes, in conjunction with the Indian Health Service, should be allowed to certify Homehealth/ Homemaker Service agencies in order to receive third-party reimbursements.
7. The Indian Health Service should facilitate the use of traditional medicine in treatment, where appropriate and desired by the patient. Bilingual and bicultural personnel should be available to adminsiter health care to Indian elderly.
8. A coordinated transportation system should be developed to enable elderly to access health care and services.

BACKGROUND. The health status of Indian elderly is not equivalent to that of the non-Indian population, as shown by the fact that life expectancy of American Indians is eight years less than that of the U.S. population as a whole.

Major health problems of older Indian people (as identified for NICOA by the Association of American Indian Physicians) include obesity, diabetes, poor nutritional status, hypertension, cancer, pneumonia, vision problems (especially cataracts), and dental problems. There are some indications that mental health problems also occur at a higher rate than among the older U.S. population in general.

Virtually all of these problems can be prevented or controlled through relatively simple measures. Yet most Indian elders receive medical and dental care only on an emergency basis. The overriding reason appears to be the lack of a national strategy for delivery of preventive health care. Other major reasons: 1) lack of coordination and linkages among the aging network and health care providers including the Indian Health Service; 2) lack of transportation to medical facilities; 3) lack of information about health services and preventive care; 4) lack of cultural sensitivity by medical service providers.

It should be noted that from the Indian perspective, "health" or "wellness" involves more than an absence of disease; the Indian concept of "health" denotes harmony, balance, and well-being throughout the physical, mental, spiritual, and social spheres of life.

RECOMMENDATIONS

1. The Administration on Aging and the Health Care Financing Administration, together with the Indian Health Service, the National Indian Council on Aging and the National Indian Health Board, should develop national policy and strategy to emphasize delivery of preventive health care to elderly.
2. The Older Americans Act should be strengthened as a vehicle to promote health and wellness of the elderly. Specifically:
   a) Funding should be increased for congregate and home-delivered meals under both Title III and Title VI.
   b) Indian tribes should be allowed to determine the age at which tribal members become eligible for aging services, since the local community is in the best position to know who is in need of services.
   c) Title VI requirements should be changed to allow smaller tribes to receive direct funding for provision of aging services.
   d) Nutrition education programs should be expanded for Indian elderly as well as for service providers.
3. Transportation services to bring elderly to medical, nutrition, and social services should be expanded, and funding increased accordingly.
4. Coordination and linkages between the aging network and health care providers, including the Indian Health Service, should be developed and strengthened, with the goal of improving health care for both reservation and urban Indian elderly.
5. Emphasis should be placed on developing multi-purpose centers that serve Indian elders on reservations and in urban areas to promote mental and physical health through social, educational, nutritional, recreational, and employment opportunities.
6. Health education and health screening (including vision, hearing, and hypertension tests) should be offered at elderly meal sites and senior centers, along with appropriate health education, outreach, and referral. The Health Fair Program should be expanded nationwide.
7. No elder should be deprived of prescription medications, eyeglasses, hearing aids, dentures, or other prosthetic devices because of inability to pay for them.
8. Bilingual and bicultural health and social service providers should be recruited to administer health services to Indian elderly.
9. Emphasis should be placed on establishing and expanding programs that provide intergenerational contact and learning experiences. In addition to the benefits for younger Indians, such programs are helpful to elders' mental health by easing feelings of uselessness and loneliness.

ECONOMIC WELL-BEING

POSITION. It is the position of the National Indian Council on Aging that Indian elderly must be guaranteed an income above the poverty level in order to live in honor and dignity.

BACKGROUND. The economic well-being of Indian elderly is more precarious than that of most of our nation's elderly.

Sixty-one percent of Indian elderly have incomes below the 1980 national poverty level.

One-third of all Indian elderly receive SSI, which provides benefits below the national poverty level, as their sole source of income.

Sixty percent of Indian elderly support family members with their inadequate incomes.

The average income of Indian elderly (regardless of source) is insufficient to provide the life-supporting essentials of food, clothing, shelter, fuel, water, and medical care.

Indian elderly have worked hard to provide for themselves and their families. However, due to lower levels of education and higher levels of unemployment in their communities, they have not had the opportunity to earn Social Security or private pensions.

The average Indian elder is unable to participate in retirement programs because of a life expectancy that is eight years lower than that of non-Indian people due to greater health problems and a harsher environment.

RECOMMENDATIONS

1. **A single income support program** for Indian elderly should be established which will guarantee an income **at least 25% above the poverty level.** This should combine the benefits of Social Security, SSI, BIA-General Assistance, food stamps, and other income support programs.
2. **No changes** should be made **in the Social Security eligibility age** until further research can be conducted to determine an impartial policy of eligibility for ethnic populations that have a lower life expectancy.
3. The **income benefits** of the elderly should not be reduced when they move in with their families. In addition, there should be **income tax credits for persons who financially support elderly relatives,** regardless of the elder's place of residence. These changes will promote the family and protect the families' economic well-being.
4. **Social Security regulations** should be changed to encourage self-sufficiency and to protect the vulnerable:
   a) Elderly people should not pay for Social Security payment mistakes which will adversely affect their economic well-being.
   b) The allowable unearned income level (including royalties and tribal dividends) should be increased.
   c) The earned income provision should be eliminated.
5. The Department of Commerce should develop programs for the **economic development of Indian tribes** within the national economic recovery plans to ensure economically healthy Indian societies which can take care of their elderly.
6. The Administration on Aging and the Social Security Administration should initiate an **education program to teach and advise elderly on stretching limited incomes, managing their resources** through good saving and banking practices, and becoming more self-reliant and self-sufficient.

PROMOTION AND MAINTENANCE OF WELLNESS

POSITION. The National Indian Council on Aging recommends re-ordering national priorities to promote the health and well-being of the elderly through increased efforts aimed at prevention and early detection of physical and mental health problems of older Indian adults.

FAMILY AND COMMUNITY SUPPORT

POSITION. The families of the nation's Indian elderly represent a tremendous resource that has been utilized by the elderly to meet their social, medical, psychological, and spiritual needs. National policies should encourage, enhance, and strengthen these networks. The implementation of these policies will ensure that elderly Indians will receive the most appropriate and desired level of care.

BACKGROUND. The Indian community is characterized by the existence of the extended family kinship system. A recent study showed that 26% of the Indian elderly care for at least one grandchild, 58% of all elderly homes have two or more persons residing there, 67% of all elderly Indians live within five miles of their relatives and depend on these relatives for assistance in getting groceries, medical attention, etc.

As a unique community that has continued to retain its culture, its right to exist alongside other cultures is threatened by the many rules, laws, and priorities dictated by others. It is obvious that past efforts to absorb the Indian community have failed and therefore new initiatives to allow Indian communities to determine their destiny must be encouraged, developed, and protected.

RECOMMENDATIONS

1. The Bureau of Indian Affairs, Indian Health Service, Administration for Native Americans, Administration on Aging, and the National Indian Council on Aging should **develop a national Indian aging policy.** This should be presented to the Congress of the United States by December 1983.
2. Title VI of the Older Americans Act of 1978 should be amended to delete the provision of required services that Indian tribes are currently required to comply with.
3. Age requirements for elderly services in the Indian community should be determined by the Indian community and funding systems should be implemented that will allow for the development of inter-generational programs.
4. The Indian tribes, in conjunction with th Indian Health Service, should be allowed to certify Home-health/Homemaker Service agencies in order to receive third-party reimbursements.
5. Indian tribes, for purposes of Medicaid, should be considered as states and therefore eligible to administer the Medicaid programs in their community.

OPTIONS FOR LONG-TERM CARE

POSITION. The National Indian Council on Aging firmly supports the development of a **coordinated system of long-term care** that assists the elderly to function with the maximum level of dignity, independence, and harmony with their family, community, and culture. Such a system must encompass the "continuum of care" concept which includes both health and social services.

BACKGROUND. The need for long-term care options within the Indian community is evidenced by its generally poorer level of health and higher level of disability. For example, a national study recently showed that proportionately fewer Indians aged 55+ are able to carry on activities of daily living without help than are non-Indians aged 65-. Poverty, rural isolation, lack of transportation, cultural and linguistic barriers, all have prevented the Indian elder from using existing supportive services as intensively as non-Indian elderly do. Many Indian elders continue to rely primarily on the traditional support network, the family — particularly offspring, spouse, and grandchildren. In spite of the strong traditional emphasis on family, community, and tribe, there are currently few supportive services available to Indian families who care for elders, or for Indian elders who require more than a daily hot meal but less than institutionalization. The few services that exist are too often inappropriate to Indian culture and family structure.

Finally, nursing homes create a special dilemma for Indian elderly. Although clearly viewed by the Indian community as a last resort, such care is sometimes necessary. Federal regulations present almost insurmountable barriers to construction of nursing homes on tribal lands. There are less than 300 nursing

home beds on reservations; the remainder of the more than 5,000 Indian elders estimated to require nursing home care must reside in nursing homes off-reservation, often resulting in severe culture shock and almost complete disruption of the family and community support system.

RECOMMENDATIONS

1. A federal long-term care policy should be developed to encompass the **continuum of care,** including non-institutional and institutional services that respond to the physical, mental, and social needs of the elderly. Regulations must be flexible enough to ensure that the long-term care services provided through such a system are appropriate to the local community and culture.
2. Those federal policies and regulations that are biased toward insitutional care should be revised, with the input of the National Indian Council on Aging, Indian tribes and organizations, to ensure that the elderly will be able to stay in their own home and community as long as possible.
3. The various governmental agencies which relate to long-term care of the elderly must coordinate their policies, regulations, and funds to allow for development of a streamlined long-term care system. These agencies include the Administration on Aging, the Health Care Financing Administration, the Department of Transportation, the Bureau of Indian Affairs, the Indian Health Service, and the Administration for Native Americans.
4. Support systems to maintain Indian elders in their homes should be developed, expanded, and funded at an increased level. Such services include homehealth/homemaker/chore services, transportation, shopping, home-delivered meals, checking, and referral services.
5. Supportive services for family members who care for an elder must be enhanced, including respite care, training, and financial support for a family member who provides full-time care.
6. Federal policies should be revised to encourage availability of "swing beds" in hospitals, particularly in areas where construction of nursing homes is not feasible.
7. Nursing homes and hospitals should offer arrangements that allow maximum interaction between residents and their families and communities. Examples include rooms in which visiting relatives can spend the night; rooms or facilities in which religious and traditional healing ceremonies can be held; and areas for cultural activities such as traditional dances and singing.
8. All hospitals should provide discharge planning services, to include coordination with aging services and home care providers.
9. Research should be conducted to develop model day care centers and multi-purpose senior centers for Indian communities, to provide social and support services in a culturally-apropriate context.
10. Indian tribes should receive direct funding for design, construction, and operation of culturally-appropriate nursing homes and alternatives on tribal land.
11. Long-term care services on reservation lands should be subject to federal and tribal, not state, regulations. Relevant federal agencies should coordinate with NICOA to develop appropriate regulations and standards.
12. Research should be conducted to develop model hospices or culturally-appropriate variations for Indian communities.
13. Society must recognize the right of the elderly to die with dignity, in concert with their own values and cultural traditions.

HOUSING

POSITION. It is the position of the National Indian Council on Aging that Indian elderly should have the opportunity for suitable housing appropriately constructed in a manner and location of their choice at a cost which they can reasonably afford.

BACKGROUND. The majority of the Indian elderly do not have an adequate income to cover housing

and utility costs along with other necessities of life. Some elderly can barely afford low-rent public housing and are evicted upon the first rent hike because their fixed incomes cannot cover the additional costs.

The problems in housing vary depending upon geographic area and climatic conditions, with lack of air conditioning or plumbing creating problems in some areas. On reservations over 25% of Indian households are without plumbing. Housing of Indian elderly tends to be old and dilapidated. Approximately 26% of the homes occupied by Indain elderly were constructed prior to 1939. There is also considerable overcrowding. In a recent national study, 25% of Indian elderly reported bedrooms occupied by three or more persons. Service outages of critical systems were also reported. Heat, water, and toilet outages were 20%, 24%, and 15% respectively. In Alaska, 44% of all respondents claimed that they had heat outage the preceding winter.

The Department of Housing and Urban Development has provided some housing, but is not satisfactorily meeting the present need for housing for Indian elderly, a need which is rapidly growing.

RECOMMENDATIONS

1. The Department of Housing and Urban Development should coordinate with the National Indian Council on Aging and the Bureau of Indian Affairs to review and revise policies and regulations that create barriers to development of appropriate housing for Indian elderly, and should develop a national policy and strategy to address housing needs of Indian elderly. This policy should include a commitment by the IHS to provide running water and sewer to elders' homes.
2. Housing projects should take into consideraton the respective Indian heritage and architecture, and the special needs of elderly.
3. More funds should be made available for senior citizen housing on reservations.
4. Indian tribes should retain jurisdiction over Indian lands on which HUD projects are constructed.

OLDER AMERICANS AS A CONTINUING RESOURCE

POSITION. It is the position of the National Indian Council of Aging that there should be an aggressive strategy to create opportunities for Indian elders to contribute through dignified and meaningful roles to the family, community and society.

BACKGROUND. Indian elders are the foundation of the family and the Indian tribes. Utilization of this natural resource strengthens our society.

The most vital role of the elderly in Indian communities is the preservation of culture and religious tradition, through which elderly contribute to the health and well-being of Indian children, families, and society.

Given the opportunity to work, Indian elders play important roles in Older Americans Act Title V Senior Employment Porgrams, Foster Grandparent Programs, senior centers, and other programs. This has improved the mental health of the elderly and has benefitted the community.

More Indian elderly (17.2%) are working or seeking work than non-Indian elderly (11.6%). However, they are less skilled and have fewer years of formal education. Indian elderly will need adult education programs to prepare them for new roles.

Our society cannot continue to ignore the reservoir of knowledge and experience represented in our elders.

RECOMMENDATIONS

1. The **Indian Religious Freedom Act** must be strengthened with national policies which protect Indian cultural and religious practices. Arts and humanities and education funds should be set aside to record the elderly's knowledge of customs and tribal traditions.
2. Federal policies regarding service delivery should be changed to promote inter-generational relationships and services to strengthen

the family structure. Regulations should be flexible to conform to tribal cultural practices.

3. The Indian aging network should coordinate a national initiative to **create new employment opportunities** for Indian elders. All elderly persons able and seeking work should have **access to appropriate and flexible employment** and to job training and counseling where required. There should be no age discrimination.

4. The federal government should aggressively implement a national policy which encourages the full and part-time employment of elderly in appropriate federal programs, such as education, social services, aging, mental health, and alcoholism. Demonstration projects should be developed to test the best methods of utilizing elderly in service and education programs, including Indian programs.

5. **Adult education** funds should be directed to minority elderly needs. Senior centers and community locations should be focal points of instruction.

RESEARCH

POSITION. It is the position of the National Indian Council on Aging that research can provide valuable assistance to the Indian community in improving the lives of their elders through the applicaton of new knowledge and innovative techniques.

BACKGROUND. The number of Indian elders has grown from 63,000 in 1970 to 109,000 in 1981. This represents a 72% increase, and indications are that this population will continue to grow dramatically into the next century. The lack of research activity within the Indian elderly community results in a lack of information upon which to base policies and programs. The diversity of the Indian community requires and in-depth analysis to determine the Indian aging process in both the basic and applied research fields. However, the need for good research is predicated upon culturally sensitive researchers who are accountable to the Indian community.

RECOMMENDATIONS

1. The National Institute on Aging, the National Science Foundation, the National Institute for Mental Health, the Indian Health Service, the Administration on Aging, and the National Indian Council on Aging should implement a National Indian Aging Research and Strategy Task Force for the purpose of developing an Indian aging research agenda.

2. Research activities conducted in the Indian community must comply with the cultural values and processes of the respective Indian communities.

3. Additional research must be conducted to identify the needs of the Indian elderly at the tribal and national levels, and to develop and test innovative service delivery techniques that incorporate the concept of family.

4. Longitudinal research must be conducted to document the aging process within the Indian population.

5. Funding for Title IV of the Older Americans Act should be increased, thereby increasing the number of Indian researchers conducting research on aging within the Indian community.

CONDITIONS FOR CONTINUING COMMUNITY PARTICIPATION

POSITION. It is the position of the National Indian Council on Aging that all elderly, and specifically the Indian elderly, be provided with the necessary supportive services to allow them to continue to contribute to their communities.

BACKGROUND. In a recent study completed by the National Indian Council on Aging, it was found that 73% of the Indian elderly were mildly to totally impaired in their ability to cope with the rudiments

of daily living. 74% do not have Medicaid coverage, 67% have barely enough income to meet their financial obligations. In most communities, including the Indian community, the availability of transportation largely determines the extent to which the elderly remain a vital component of the community. In the 1980 mini-White House Conference on Aging for Indian elderly, participants identified as an important issue the need to retain their culture. Programs, they felt, need to be instituted with values and customs of the beneficiaries in mind, and these values and customs need to be integrated into the future generations of Indian elders.

RECOMMENDATIONS

1. Funding should be increased to provide an adequate level of transportation services under the Older Americans Act, the Urban Mass Transportation Act, and other relevant legislation.
2. The various departments of the federal government in the process of decentralization should identify and consider Indian communities as regional districts or local offices of their respective program, with bicultural and bilingual staff.
3. Educational systems, especially those in the Indian community, should develop and implement learning processes that include the utilization of the elderly of the community as learning resources.
4. Increase funding for and expand existing volunteer programs such as the Foster Grandparent Program, Senior Companion Program, and the Retired Senior Volunteer Program in the Indian community.
5. Outreach efforts to locate and refer Indian elders to services need to be instituted as an "escort-advocate" program funded jointly by the Social Security Administraton, Veteran's Administration, Department of Agriculture, Bureau of Indian Affairs, Indian Health Service, and the Administration on Aging, thereby initiating the first step towards case management.

IMPLICATIONS FOR THE ECONOMY OF AN AGING POPULATION

POSITION. The policies of the United States must insure that the elderly, the poor, the handicapped, and the children — the vulnerable members of our society — are protected from the negative effects of inflation and rapid social change.

BACKGROUND. The United States will continue to experience rapid social change in the next decade. The current inflation is eroding the economic status of the Indian elderly. The number of Indian elderly living below the national poverty level is increasing. In 1980, 50% of the nation's Indian elderly had incomes below the poverty level. Many young people who support their elders have relocated to find work.

The number of Indian elderly nation-wide is growing. In 1970, there were 63,000 over 60 years of age. In 1980, there were 109,000 over 60 years of age. This is a 72% increase. But although the absolute number of Indian elders is growing rapidly, the younger Indian population is increasing evern faster. Therefore, in contrast to the trend in general U.S. population, the median age of the Indian population is decreasing rather than rising.

The United States has assisted Indian tribes in building an Indian network of aging services capable of assisting the growing number of Indian elderly in meeting their daily needs of food, clothing, shelter, and physical, social, and spiritual well-being.

Current federal actions threaten recently achieved gains in the health status and well-being of Indian people, particularly those most vulnerable. The progress made by tribal governments to be economically self-sufficient is jeopardized by unplanned budget slashing. This is threatening the long term development of healthy and economically strong Indian societies.

Federal programs that continue to NOT BE direct-funded to tribes and that are not coordinated with Indian aging programs are wasteful and inefficient.

RECOMMENDATIONS

1. Programs which support the vulnerable members of our society must be fully funded to insure that we are not jeopardizing their lives and well-being.
2. Federal Indian programs must be re-designed in scope and policy to meet the needs of the growing Indian elderly population.
3. **The Indian aging network must be strengthened** and utilized by federal agencies to aid the increased numbers of elderly. All entitlement programs should be directly funded to tribal governments.
4. A national review of tribal retirement plans should be initiated for the purpose of helping each tribal government to establish a quality retirement program.
5. Federal laws, program regulations, and employment practices should be changed to **foster employment opportunities for Indian elderly.** This will enable the elderly to contribute to the national economic recovery and their tribe's self-sufficiency.
6. Study should be given to the implications of the fact that the median age of minority populations is decreasing while the median age of the U.S. population as a whole is steadily increasing.

EDUCATIONAL AND TRAINING OPPORTUNITIES

POSITION. The National Indian Council on Aging supports expansion of educational and training opportunities designed to enchance the lives of Indian elders. NICOA is also in favor of involving Indian elders in the education of Indian youth.

BACKGROUND. There is a high level of interest in educational and training opportunities for Indian elders, as reflected both in national conferences and a national research study conducted by NICOA. However, opportunities to satisfy this interest are few, especially in rural and reservation areas.

More than a quarter of the Indian population over age 60 has less than a fifth grade education; 63% never attended high school, and only 18% are high school graduates. Job skills are also relatively low, as approximately 65% of Indians over 60 describe their life's occupation as semi-skilled or unskilled worker, or farm laborer. These circumstances, combined with the fact that over 50% of the Indian elderly live below the poverty level, lead to a high degree of interest among Indian elders in job training. More than 10% of Indian elders in a recent national survey said they felt they currently need job training.

The lack of financial and legal skills implied by their educatonal and occupational levels also results in strong interest in training to handle personal legal and business matters. More than 20% of Indian elders in NICOA's national survey said they felt they needed help handling such matters. There is also a need for training in a wide range of other topics.

Also of vital concern is the potential contribution of Indian elders to the education of Indian youth. The traditional role of the Indian elders was that of teacher, a role that is even more critical today to ensure that the traditions and culture known by today's elderly is not forever lost. Current federal policy and regulations, however, make it difficult to employ Indian elders as bilingual-bicultural resource persons within the school system.

RECOMMENDATIONS

1. Federal policies, regulations, and hiring practices regarding elementary and secondary education (including the Johnson-O'Malley program and Title VI-A of the Indian Education Act) should be revised to encourage use of Indian elders as bilingual-bicultural resource persons in the schools. The Department of Education and the Bureau of Indian Affairs should make funds available to train and employ elderly as resource persons for elementary and secondary students.
2. The Foster Grandparent Program should receive increased funding and should be expanded to serve youth through high school age.
3. Job training and counseling should be made available to elderly. Such training should be

geared to the educational and occupational level and job opportunities of the local area.

4. Funding for Title V of the Older Americans Act should be increased, and Indian tribes should be eligible for direct-funded Title V programs.
5. Training in areas such as personal legal and business affairs (e.g. wills, taxes, loans, mortgages, banking practices, consumer rights), as well as nutrition, advocacy, coping with the stresses of aging and widowhood, and other topics of interest to local elders, should be made available at elderly meal sites and senior centers. Funds should be specified for this purpose.
6. Education, training, and enrichment programs should be offered for older adults through colleges and universities. They should be adequately advertised to notify Indian elders of such opportunities. Tuition for elderly should be reduced or waived for such programs, or federal funds should be used to subsidize the actual costs of such programs. Transportation services should be made available for elders who would like to participate in such programs.
7. Pre-retirement planning and counseling should be offered by employers well in advance of employees' retirement. The Bureau of Indian Affairs and the Indian Health Service, in cooperation with the National Indian Council on Aging, should develop and implement a pre-retirement planning and counseling program.

PUBLIC SECTOR ROLES AND STRUCTURES

POSITION. It is the position of the National Indian Council on Aging that Indian elderly, regardless of the legal status of their tribes, be provided necessary services by the Public Sector.

BACKGROUND. Although Indian elderly have been and are presently entitled to various services their level of participation has been very low. As wards of the federal government, Indian elderly are eligible to participate in entitlement services the same as the non-Indian population. According to the 1980 census the Indian and Alaskan Native population is approximately 1.5 million with approximately 109,000 individuals being 60 years and older. About 400 different tribes exist in the U.S. today, speaking over 250 distinct languages. At present there are eight Indian Area Agencies on Aging administering Older Americans Act Title III programs. In addition there are 85 Title VI grantees with an average grant of $65,000 providing services for Indian elderly.

RECOMMENDATIONS

1. Federal, state, and local laws which pertain to elderly rights should be vigorously enforced to ensure that unjust actions such as discrimination are non-existent.
2. State and local governments should ensure that those Indians under their jurisdiction receive an adequate level of services to meet their needs.
3. The federal government should provide an adequately staffed Indian aging desk in each department that provides services to Indian elderly.
4. The U.S. government should adopt a national policy to provide direct funding for social services to Indian tribes.
5. The U.S. government should strengthen its commitment to Indian people by fully implementing the Indian Self-Determination Act (P.L. 93-638) by providing tribes with adequate funds to successfully administer their own programs.

PRIVATE SECTOR ROLES, STRUCTURES AND OPPORTUNITIES

POSITION. It is the position of the National Indian Council on Aging that the private sector, which historically has benefitted from the resources of the Indian community, invest in the human resources of that community, with special emphasis on the elderly, in a manner advantageous to both.

BACKGROUND. For the over-60 population, more Indians (17.2%) are working or seeking work than are non-Indians (11.6%). Many elderly Indians find themselves entering the job market for the first time. They are less skilled than the population as a whole, with more than a fourth having less than five years of education. Nearly five times as many Indian elderly feel the need for education or on-the-job training to prepare for employment than do their non-Indian counterparts.

While tribal sovereignty under U.S. law gives tribes the right to tax business activity on the reservation, the exercise of that right may effectively discourage private investment on the reservation since non-Indian businesses are also subject to state taxation.

RECOMMENDATIONS

1. Employers in areas of Indian population should be encouraged to establish training programs which target the Indian elderly as prime beneficiaries. This could be done in conjunction with the various federal departments responsible for meeting the needs of the elderly.
2. Employers should be encouraged to develop flexible work arrangements such as part-time, flexitime and shared jobs for the Indian elderly. In addition, services which are especially needed by the less educated Indian elderly should be provided such as tax, legal and financial conseling, pre-retirement planning, and post-retirement counseling.
3. Pension programs should be established which do not eliminate the newly hired older worker from participation. If necessary, ERISA requirements should be changed to accomplish this.
4. Both public and private donations should support the organization of community based temporary employment placement centers for the older worker.
5. Federal law should provide that when a tribe exercises its right to tax business activities, the states' rights to tax those same activities are reduced proportionally. This will eliminate the spectre of double taxation and remove what may become a major disincentive to private investment on Indian reservations.

OLDER WOMEN CONCERNS: GROWING NUMBERS, SPECIAL NEEDS

POSITION. It is the position of the National Indian Council on Aging that the needs of older Indian women be addressed through a coordinated system of services that assist them to live with a maximum level of independence, well-being, and dignity, in harmony with their community and culture.

BACKGROUND. The rising population of women who are age 65 and over has called attention to their particular attributes and special needs.

Elderly Indian women, especially those in a rural setting, tend to live in an extended family. Household size approaches three persons. Approximately half of all households consist of married couples and others such as their children, grandchildren, or foster children. The financial management burden generally falls on the woman. Statistics show that 58% can barely meet monthly expenses and 65% feel they do not have enough resources to meet future needs.

Over 55% of Indian women age 60+ are widowed. Those who live alone face special problems of loneliness, lack of adequate transportation, lack of resources for home repairs, lack of family support systems, and limited opportunity for self-improvement.

RECOMMENDATIONS

1. Federal, state, and tribal governments should jointly promote removal of bureaucratic barriers for positive coordination of all resources for social service programs affecting the elderly at the community level, making a case management approach possible in reality as well as theory.
2. The federal government should review and revise its national housing policy to target

resources to meet the housing needs of the elderly Indian woman, including repair, renovation, and weatherization.

3. Model Indian adult education programs should be developed by the Bureau of Indian Affairs and the Department of Education, with the assistance of the National Indian Council on Aging, to bring the widowed woman back into a meaningful role within the community.
4. Alternate support services, including surrogate family systems, should be developed for the single older woman.
5. Education and mental health resources should be coordinated to aid women in managing the stresses of age such as widowhood, effect of aging, illness, and loneliness, and to sensitize service providers to the special needs of older women.

NATIONAL INDIAN COUNCIL ON AGING, INC

NEWLY-ELECTED OFFICERS OF NICOA

CHAIRMAN Walter Moffet	NEZ PERCE	PORTLAND AREA
VICE CHAIRMAN Sherman Lillard	EASTERN CHEROKEE	CENTRAL AREA
SECRETARY Madeline Colliflower	GROS VENTRE	BILLINGS AREA
TREASURER Patricia Woods	CHICKASAW	MUSKOGEE AREA

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1982 NATIONAL CONFERENCE ELECTIONS

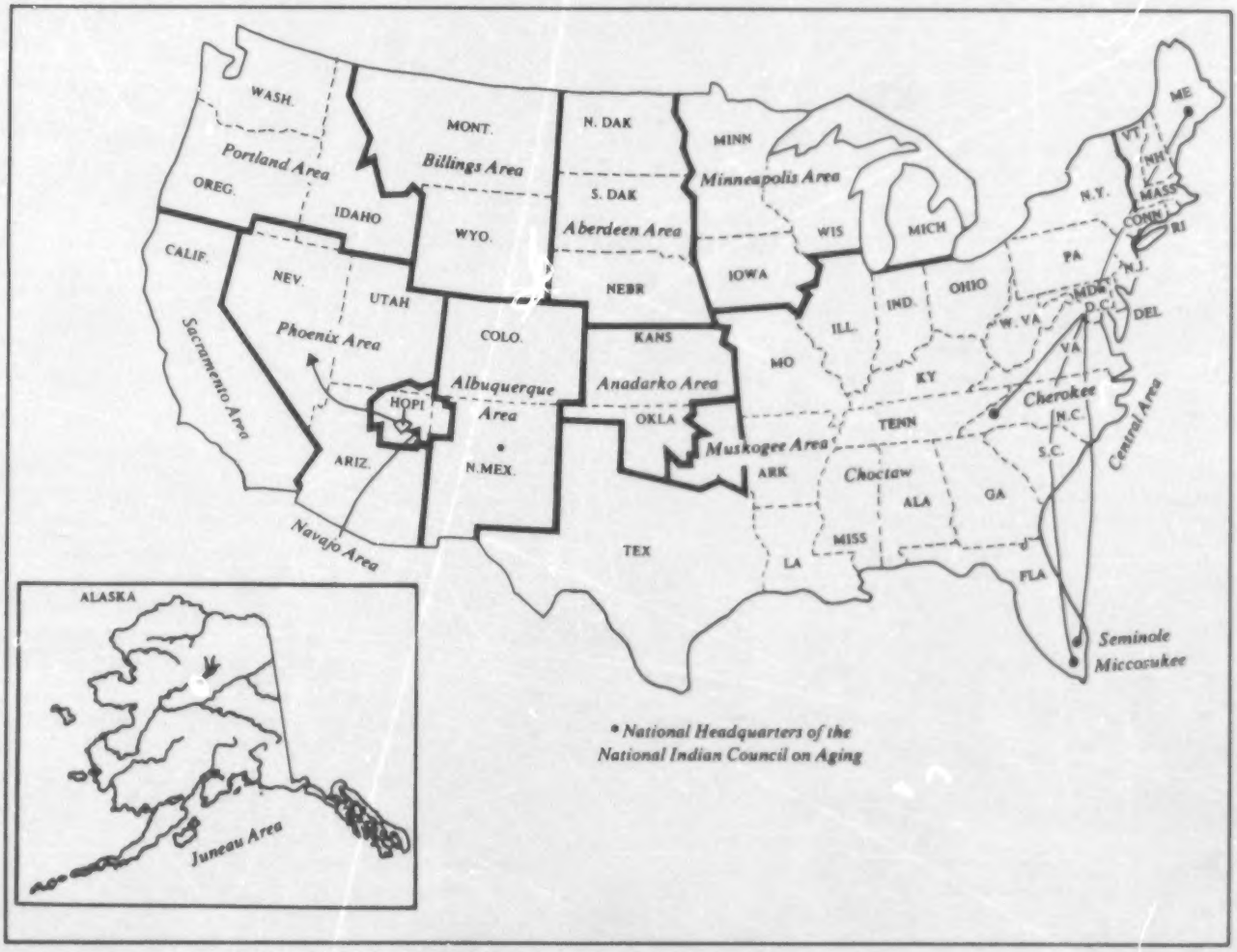
ROSTER

AREAS	COUNCIL MEMBER
ABERDEEN	Rogers, Marie
	Birdsbill, Lawrence
	Montgomery, Cecelia
ALBUQUERQUE	Abeyta, Joseph, Sr.
	Cloud, Phoebe
	Effman, George
ANADARKO	Blanchard, Cecelia
	Pinezaddleby, Rev. Robert
	Emmett, Cordelia
BILLINGS	Colliflower, Madeline
	Rowan, Dolly
CENTRAL	Baumann Nelson, Eunice
	Jemison, Alicia
	Lillard, Sherman
	Mofsie, Alvina
	Jumper, Betty Mae
JUNEAU	Haldane, Victor
	Guthrie, Solomon, Sr.
MINNEAPOLIS	John, Anna
	Peake, Emily
	Wanatee, Adeline
	Youngbear, Josephine
MUSKOGEE	Woods, Patricia
	Carlile, John
NAVAJO	Cody, Kenneth, Sr.
	Thompson, Sophie
PHOENIX	Askenette, Syble
	Holmes, Robert
	Norris, Alice
	Stevens, Jesse J.
	Nuvayestewa, Leon A.
	Sixkiller, Tammy
PORTLAND	George, Moses
	Moffett, Walter
	Ackerman, Dorothy
SACRAMENTO	Dixon, Lorena
	Culp, Georgia
	Groves, Woodrow
	Guillen, Jennie

GROUPINGS OF STATES BY AREAS

Aberdeen Area—Nebraska, North Dakota, and South Dakota
Albuquerque Area—Colorado and New Mexico (with the exception of Eastern Navajo Reservation)
Anadarko Area—Kansas and Western Oklahoma
Billings Area—Montana and Wyoming
Central Area—Florida, Mississippi, New York, and North Carolina; New England—Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont
Juneau Area—Alaska

Minneapolis Area—Iowa, Michigan, Minnesota, and Wisconsin
Muskogee Area—Eastern Olkahoma
Navajo Area—All portions of the Navajo Reservation In Arizona, New Mexico, and Utah
Phoenix Area—Arizona (with the exception of the Navajo Reservation), Nevada, and Utah
Portland Area—Idaho, Oregon, and Washington
Sacramento Area—California



* National Headquarters of the National Indian Council on Aging